Fill in this information to identify your case:	
United States Bankruptcy Court for the: Southern District of Indiana	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Check if this is an amended filling

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Int 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Francisco	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	Uribe	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8	First name	First name
	years		,
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of	xxx - xx - <u>2</u> <u>8</u> <u>7</u> <u>1</u>	VVV _ VV _
	your Social Security		xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

Pebtor 1 Francisco Uri		Case number (# known)
First Name Maddle N	arrie Last Name	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	4473 Connaught West Drive	Alumbar Pharm
	Number Street	Number Street
		<u> </u>
	Plainfield IN 46168 City State ZIP Code	City State ZIP Code
	Hendricks	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's malling address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason, Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason, Explain, (See 28 U.S.C. § 1408.)

De	ebtor 1 Francisco Uril	oe	Lasi Nama			Case number (#kr	nown)
P	art 2: Tell the Court Abou	ıt Your B	ankrup	tcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bank Cha Cha Cha	pter 7 pter 11 pter 12	a brief description of a orm 2010)). Also, go	each, see <i>Nolic</i> to the top of pa	e Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing appropriate box.
8,	How you will pay the fee	loca your subn with I ne App I rec By la less	I pay the I court for self, you mitting you a pre-pred to palication for self, and the	or more details about may pay with case our payment on you inted address. The fee in instal for Individuals to Patential or Individuals to Patential or Individuals to Patential of the official part	thow you may the cashier's cour behalf, you ments. If you may required to, wo overty line that	nay pay. Typicall theck, or money ar attorney may p u choose this op Fee in Installme request this opt vaive your fee, a at applies to you	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check stion, sign and attach the nts (Official Form 103A). ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to
9.	Have you filed for bankruptcy within the last 8 years?	pay Cha	the fee in pter 7 Fi	n instalments). If y ling Fee Waived (0	ou choose the Official Form 1	is option, you made it is a second of the it	ust fill out the Application to Have the
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District _		When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	☐ No. ☑ Yes.	No.	r landlord obtained a ce? Go to line 12.			and do you want to stay in your Against You (Form 101A) and file it with

2. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor see 11 U.S.C. § 101(510). 2. Are you filing under Chapter 11. No. I am not filing under Chapter 11. Sc. § 101(510). 2. Are you cown or have any yorperty that not as depropated to you own or have any yorperty that needs immediate attention. 2. Are you worn or have any yorperty that needs immediate attention? 3. Are you so more than ore supposed to you own or have any yorperty that needs immediate attention? 4. No. I am not filing under Chapter 11. Sc. § 101(510). 4. No. I am not filing under Chapter 11. Sc. § 101(510). 5. I am filing under Chapter 11. Sc. § 101(510). 6. I am filing under Chapter 11. Sc. § 101(510). 7. No. I am not filing under Chapter 11. Sc. § 101(510). 8. I am filing under Chapter 11. Sc. § 101(510). 8. I am filing under Chapter 11. Sc. § 101(510). 9. No. I am not filing under Chapter 11. Sc. § 101(510). 9. No. I am not filing under Chapter 11. Sc. § 101(510). 9. No. I am not filing under Chapter 11. Sc. § 101(510). 10. No. I am not filing under Chapter 11. Sc. § 101(510). 11. Sc. § 101(510). 12. No. I am not filing under Chapter 11. Sc. § 101(510). 13. No. I am not filing under Chapter 11. Sc. § 101(510). 14. No. I am not filing under Chapter 11. Sc. § 101(510). 15. No. I am not filing under Chapter 11. Sc. § 101(510). 16. No. I am not filing under Chapter 11. Sc. § 101(510). 17. No. I am not filing under Chapter 11. Sc. § 101(510). 18. No. I am filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am not filing under Chapter 11. Sc. § 101(510). 19. No. I am filing under Chapter 11. Sc. § 101(510). 19. No. I am filing under Chapte	Francisco Urit		Last Name	Case number	BF (if known)_		1 5 5 1 1
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of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal errity such as a corporation, partnership, or Lt.C. If you have more than one sole proprietorship, use a separate sheet and attach it to his petition. Cay Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodily Broker (as defined in 11 U.S.C. § 101(51B)) None of the above the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). If you are filing under Chapter 11, the court must know whether you are a small business debtor or so that are you a small business debtor? No. I am not filing under Chapter 11, the court must know whether you are a small business debtor or set are set appropriate deadlines. If you indicate that you are a small business debtor or set are set appropriate deadlines. If you indicate that you are a small business debtor or set are set appropriate deadlines. If you indicate that you are a small business debtor or set are set appropriate deadlines. If you indicate that you are a small business debtor or set are set appropriate deadlines. If you indicate that you are a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Chapter 11 and I am a small business debtor according to the definitio	Report About Any B	usiness	es You Own as a Sol	e Proprietor	-		
business? Yes Name and location of business Assign proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		☑ No.	Go to Part 4.				
Name of business, if any separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. City		Yes.	Name and location of but	siness			
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ILC. Number Street			N. 1984 A. 1984 A. 1985 A. 198				
Separate sheet and attach it to this petition. City State ZIP Code			Number Street				- ×
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Bankruptcy Code. Bankruptcy C	business debtor, see		the Bankruptcy Code.				
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fficial Form 101 Voluntary Petition for Individuals Filling for Bankruptcy page							page 4

De	btor	1

Franc	isco	Uribe
Frank house.	14.	telle Alexana

Case number (# known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
 - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
 - ☐ Incapacity. I have a mental illness or a mental deficiency that makes me
 - deliciency that makes me incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

- Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I
- Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
 - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
 - ☐ Incapacity. I have a mental illness or a mental deficiency that makes me
 - incapable of realizing or making rational decisions about finances.
 - ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
 - Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Francisco Uril		Case number (# Ano	
Part 6: Answer These Ques	stions for Reporting Purpo	ses	
16. What kind of debts do you have?	16a. Are your debts prima as "incurred by an individual No. Go to line 16b. 2 Yes. Go to line 17.	arily consumer debts? Consumer deb ual primarily for a personal, family, or hous	tsare defined in 11 U.S.C. § 101(8) sehold purpose."
	16b. Are your debts prima	rily business debts? Business debts nvestment or through the operation of the	are debts that you incurred to obtain business or investment.
	No. Go to line 16c.Yes. Go to line 17.		
	16c. State the type of debts yo	ου owe that are πot consumer debts or bus	siness debts.
17. Are you filing under Chapter 7?	☐ No. I am not filing under C	Chapter 7. Go to line 18.	
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chap administrative expens No Yes	oter 7. Do you estimate that after any exen ses are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
18. How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
20. How much do you estimate your liabilities to be? Part 7: Sign Below	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion □ More than \$50 billion
For you	I have examined this petition, a	and I declare under penalty of perjury that	the information provided is true and
	If I have chosen to file under C	hapter 7, I am aware that I may proceed, I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ich chapter, and I choose to proceed
	If no attorney represents me ar this document, I have obtained	nd I did not pay or agree to pay someone and read the notice required by 11 U.S.C	who is not an attorney to help me fill out C. § 342(b).
	I understand making a false sta	with the chapter of title 11, United States Catement, concealing property, or obtaining sult in fines up to \$250,000, or imprisonment, and 3571.	money or property by fraud in connection
	X finance	- Thick x_	
	Signature of Debtor 1 Executed on 3	Signature	d on

Debtor 1 Francisco Urib Frat Nems Meddle Nam	DE Ca e Last Name	ise number (if known)	
For your attorney, if you are represented by one If you are not represented	I, the attorney for the debtor(s) named in this petition, decl to proceed under Chapter 7, 11, 12, or 13 of title 11, Unite available under each chapter for which the person is eligib the notice required by 11 U.S.C. § 342(b) and, in a case in knowledge after an inquiry that the information in the sche	d States Code, and le. 1 also certify the which §707(b)(4)	d have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
by an attorney, you do not need to file this page.	Signature of Attorney for Debtor	Date	3 30 18 MM / DD / YYYY
	Amanda M. Hendren Printed name		
	LeBlanc Nettles Davis Firm name 401 E. Main Street		
	Brownsburg City	IN State	46112 ZIP Code
	Contact phone (317) 858-3200	Email address	amanda@indianalawgroup.com
	#29955-32	IN	8

Debtor 1	Francisco Urib	Case number (# known)
bankrupt attorney	if you are filing this ccy without an	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.
an attorn	e represented by ley, you do not ile this page.	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.
		You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.
		If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.
		Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?
		□ No ☑ Yes
		Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?
		□ No ☑ Yes
		Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
		By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.
		* Turnere - Mike *
		Signature of Debtor 2 Date Date Date MM / DD / YYYY
		Contact phone 1-708-692-3456 Contact phone
		Cell phone 1-708-692-3456 Cell phone

Email address

Email address

Debtor 1	Francisco Uri	be	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets	
	Value of what you ow	wn
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	s137,790.	00.0
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>4,120.</u>).54
1c. Copy line 63, Total of all property on Schedule A/B	s 141,910).54
art 2: Summarize Your Liabilities		
	Your liabilities	
	Amount you owe	
	Amount you owe	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	00.445	5.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 90,415.	5.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>90,415.</u>	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 90,415. \$	9.05
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 90,415. \$ 128,369.	9.05
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 90,415. \$ 128,369. \$ 218,784.).05 1.05
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ 90,415. \$ 128,369. \$ 218,784.).05 1.05
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 90,415. \$ 128,369. \$ 218,784.).05 1.05

Petitor 1 Francisco Office Middle Name	Last Name Cas	se number (# known)	(a) =
Part 4: Answer These Questions for	Administrative and Statistical Records		
6. Are you filing for bankruptcy under Char			
	art of the form. Check this box and submit this fo	orm to the court with your other	schedules.
7. What kind of debt do you have?			
Your debts are primarily consumer defamily, or household purpose." 11 U.S.C.	ebts. Consumer debts are those "incurred by an c. § 101(8). Fill out lines 8-9g for statistical purpo	individual primarily for a person ses. 28 U.S.C. § 159.	aal,
Your debts are not primarily consum- this form to the court with your other sch	er debts. You have nothing to report on this part nedules.	of the form. Check this box and	d submit
8. From the Statement of Your Current Mon Form 122A-1 Line 11; OR, Form 122B Line	thly Income: Copy your total current monthly inc 11; OR, Form 122C-1 Line 14.	come from Official	\$2,389.89
9. Copy the following special categories of	claims from Part 4, line 6 of Schedule E/F:		
		Total claim	
From Part 4 on Schedule E/F, copy the	following:		
9a. Domestic support obligations (Copy line	6a.)	\$0.00	
9b. Taxes and certain other debts you owe	the government, (Copy line 6b.)	s0.00	
9c. Claims for death or personal injury while	you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)		s0.00	
9e. Obligations arising out of a separation a priority claims. (Copy line 6g.)	greementor divorce that you did not report as	s0.00	
9f. Debts to pension or profit-sharing plans	and other similar debts. (Copy line 6h.)	+ s 0.00	
9g. Total. Add lines 9a through 9f.		s0.00	

Fill in this information to identify your cas	e and this filing:		
Paris Francisco Uribe			
Debtor 1 Frait Name Middle N	ame Last Name		
Debtor 2 (Spouse, if filing) Frat Name Madde N	rme Last Name		
United States Bankruptcy Court for the: Southern			
	District of molana		
Case number		Г	Check if this is an
			amended filing
Official Form 106A/B			
Official Form 100AVB			
Schedule A/B: Pro	perty		12/15
category where you think it fits best. Be a responsible for supplying correct informa write your name and case number (if know Part 1: Describe Each Residence, B	uilding, Land, or Other Real Estate You Own or Ha	le are filing together, bo nis form. On the top of a ve an Interest In	oth are equally
1. Do you own or have any legal or equitab	ole interest in any residence, building, land, or similar proj	perty?	
No. Go to Part 2.			
☑ Yes. Where is the property?	18th at the the second of the second		
	What is the property? Check all that apply. Single-family home	Do not deduct secured of the amount of any secure	
1.1. 2061 West Canal Street	□ □ • • • • • • • • • • • • • • • • • • •	Creditors Who Have Clair	
Street address, if available, or other desc	ription Condominum or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land	\$ 137,790.00	s137,790.00
Blue Island IL 6	60406 Investment property	Deposits the setup	-6
City State	ZIP Code Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one	fee simple	
Cook	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
	At least one of the debtors and another	(see instructions)	, property
	Other information you wish to add about this	item, such as local	
	property identification number: PIN: 25-31-		
If you own or have more than one, list here			
	What is the property? Check all that apply.	Do not deduct secured cl	
1,2,	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	
Street address, if available, or other desc	ription Condominium or cooperative	Company value of the	Current value of the
	☐ Manufactured or mobile home	entire property?	portion you own?
-	—— Cl Land	S	\$
	☐ Investment property		
City State	ZIP Code	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only	_	
	Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
	At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it property identification number:	em, such as local	

Official Form 106A/B

Schedule A/B: Property

			What is the property? Check all that apply	Do not deduct secuthe amount of any			
1.3.	Street address, if available	n na athan dan niation	☐ Single-family home ☐ Duplex or multi-unit building	Creditors Who Hev			
	Street address, ii availabi	e, or other description	Condominium or cooperative	Current value o	f the	Curre	nt value of
			Manufactured or mobile home	entire property			n you own
			Land	\$		\$	
			☐ Investment property				
	City	State ZIP Code	☐ Timeshare	Describe the na			
	•		Other	interest (such a the entireties, o			
				nie entirenes, o	ı a me	estate	e), ii kiiowii
			Who has an interest in the property? Check one.				
	County		Debtor 1 only				
	oosni,		Debtor 2 only	D &			
			Debtor 1 and Debtor 2 only	Check if this (see instruct)		mmuni	ty property
			At least one of the debtors and another	(see mstrucu	Dris)		
			Other information you wish to add about this ite property identification number:	em, such as local			
المالما	و علاقه مناسر معالمات م		Hafter and Barton Barton A. M. Harris		Γ		
		_	Il of your entries from Part 1, including any entrie		_	s	137,790
	Describe Your \		st in any vehicles, whether they are registered or	not? Include any v	ehides		
	wn, lease, or have leg	al or equitable interes	st in any vehicles, whether they are registered or e, also report it on <i>Schedule G: Executory Contracts</i>				
ou o	wn, lease, or have leg hat someone else drive	al or equitable interes	e, also report it on Schedule G: Executory Contracts				
ou o	wn, lease, or have leg hat someone else drive vans, trucks, tractors	ial or equitable interes	e, also report it on Schedule G: Executory Contracts				
ou or	wn, lease, or have leg hat someone else drive vans, trucks, tractors	ial or equitable interes	e, also report it on Schedule G: Executory Contracts				
ou or own the ars, v	wn, lease, or have leg hat someone else drive vans, trucks, tractors, s	ial or equitable interes es. If you lease a vehicl , sport utility vehicles	e, also report it on <i>Schedule G; Executory Contracts</i> , motorcycles				
wn ti	wn, lease, or have leg hat someone else drive vans, trucks, tractors	ial or equitable interes es. If you lease a vehicle , sport utility vehicles Chevy	e, also report it on Schedule G; Executory Contracts , motorcycles Who has an interest in the property? Check one.	and Unexpired Lea	ses. ired clai	ims or e	
wn the rest	wn, lease, or have leg hat someone else drive vans, trucks, tractors, s	ial or equitable interes es. If you lease a vehicl , sport utility vehicles	e, also report it on Schedule G; Executory Contracts , motorcycles Who has an interest in the property? Check one.	and Unexpired Lea	ses. ured clai	ims or e I claims	on Schedule
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otor 1	First Name Middle Name	Last Name Case number (# k		
		Miles from an independent the second of the		
3.3	Make:	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clair	
	Year:	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	endre property r	pordon you own?
	Other information:			
		☐ Check if this is community property (see	\$	S
		instructions)		
1.4	Make:	Who has an Interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Put
	Madali	Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Model:	Debtor 2 only	Creditors Who Have Clair	ms Secured by Property
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:	— At least one of the deptors and another		
	Otter sitornation.	Charle if this is a second to	S =	s
		Check if this is community property (see instructions)		
		mad deporta)		
am	oles: Boats, trailers, motors, person	s and other recreational vehicles, other vehicles, and accessoral watercraft, fishing vessels, snowmobiles, motorcycle accessoral		
Xamı 1 No 1 Ye	oles: Boats, trailers, motors, person o	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only		d claims on Schedule D:
No No Ye	oles: Boats, trailers, motors, person oles Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
No No Ye	oles: Boats, trailers, motors, person os Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property.
No No Ye	oles: Boats, trailers, motors, person oles Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
Xamı 1 No 1 Ye	oles: Boats, trailers, motors, person oles Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
Xamı	oles: Boats, trailers, motors, person oles Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
xamı İ No I Ye	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
Xamı No Ye	oles: Boats, trailers, motors, person os s Make: Model: Year: Other information: own or have more than one, list her Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
Xamı No Ye	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
you	oles: Boats, trailers, motors, person os s Make: Model: Year: Other information: own or have more than one, list her Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
No Ye	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information: own or have more than one, list her Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only	Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clair the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
Notes and Notes	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information: own or have more than one, list her Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
Notes	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information: own or have more than one, list her Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$
you	oles: Boats, trailers, motors, person oles Make: Model: Year: Other information: own or have more than one, list her Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
you	obles: Boats, trailers, motors, person obles Make: Model: Year: Other information: Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$

Debtor 1 Francis	CO Uribe Middle Name Lest Name Case number (# known)		
Part 3: Describe	Your Personal and Household Items		
Do you own or have a	ny legal or equitable interest in any of the following items?	portion ye	uct secured claims
6. Household goods	and furnishings		
20	pliances, furniture, linens, china, kitchenware		
No Yes Describe	furniture, linens, kitchenware	S	500.00
7. Electronics			
Examples: Television	ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ns; electronic devices including cell phones, cameras, media players, games		
	tv, cell phone	s	75.00
8. Collectibles of valu	e		
	and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles		
Yes. Describe		\$	0.00
9. Equipment for spor	ts and hobbies		
Examples: Sports, pand kaya	hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments		
No Yes, Describe		s	0.00
10. Firearms Examples: Pistols, ri No Yes, Describe	fles, shotguns, ammunition, and related equipment		0.00
11. Clothes Examples: Everyday □ No	clothes, furs, leather coats, designer wear, shoes, accessories		
Yes. Describe	necessary wearing apparel	s	250.00
gold, silv	jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er		
☑ No ☐ Yes, Describe,		\$	0.00
13. Non-farm animals Examples: Dogs, car	s, birds, horses		
No Yes. Describe	Dog, 14 years old, mut	\$	0.00
A A Address			
4 Any other personal No	and household Items you did not already list, including any health aids you did not list		
Yes. Give specifi		s	
	e of all of your entries from Part 3, including any entries for pages you have attached t number here	s	825.00

portion you own? Do not deduct secured of or exemptions. a safe deposit box, and on hand when you file your petition Cash	☑ No ☐ Yes Deposits of money Examples: Checking, savings, or oth and other similar institution ☐ No ☑ Yes 17.1. Checking, savings, or oth and other similar institution 17.2. Checking, savings, or oth and other similar institution 17.3. Saving 17.4. Saving 17.5. Certification 17.6. Other for the saving of the savings	ther financial accitions. If you have	in any of the	afe deposit bo	ox, and on ha	in credit uni	Cash	portion y Do not dec or exempti	ou own? duct secured cla
portion you own? Do not deduct secured or exemptions. Cash	Cash Examples: Money you have in your very large of money Examples: Checking, savings, or oth and other similar institution. No Yes	ther financial accitions. If you have	counts; certife multiple acc	afe deposit bo	ox, and on ha	in credit uni	Cash	portion y Do not dec or exempti	you own? duct secured cla ons.
portion you own? Do not deduct secured or exemptions. Cash	you own or have any legal or equitable. Cash Examples: Money you have in your volume. Deposits of money Examples: Checking, savings, or oth and other similar institution. No Yes 17.1. Checking, 17.2. Checking, 17.3. Saving, 17.4. Saving, 17.5. Certification, 17.6. Other for 17.8. Other for 17.9. Other for 17.	ther financial accitions. If you have	counts; certife multiple acc	afe deposit bo	ox, and on ha	in credit uni	Cash	portion y Do not dec or exempti	you own? duct secured cl lons.
portion you own? Do not deduct secured or exemptions. Cash	Cash Examples: Money you have in your v ✓ No ☐ Yes Deposits of money Examples: Checking, savings, or oth and other similar institution ☐ No ✓ Yes 17.1. Checking, 17.2. Checking, 17.3. Saving, 17.4. Saving, 17.5. Certifice, 17.6. Other for 17.9.	ther financial acctions. If you have	counts; certife multiple acc	afe deposit bo	ox, and on ha	in credit uni	Cash	portion y Do not dec or exempti	you own? duct secured cl lons.
Do not deduct secured or exemptions. Cash SO. Cash SO. Certificates of deposit; shares in credit unions, brokerage houses, le accounts with the same institution, list each. Cash SO. Coertificates of deposit; shares in credit unions, brokerage houses, le accounts with the same institution, list each. Cash SO.	Examples: Money you have in your volume. No Peposits of money Examples: Checking, savings, or oth and other similar institution. No Yes	ther financial acc lions. If you have king account: king account: ngs account:	counts; certif e multiple acc	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit uni	Cash	Do not dec or exempti	duct secured cl
certificates of deposit; shares in credit unions, brokerage houses, e accounts with the same institution, list each. titution name: rst Merchants \$ 125. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Examples: Money you have in your v No Yes Deposits of money Examples: Checking, savings, or oth and other similar institution No Yes 17.1. Checking 17.2. Checking 17.3. Saving 17.4. Saving 17.5. Certifice 17.6. Other for the same of the same o	ther financial accitions. If you have king account: thing account: things account: things account:	counts; certif e multiple acc	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit uni	Cash	s	
Cash	Examples: Money you have in your volume. No Peposits of money Examples: Checking, savings, or oth and other similar institution. No Yes	ther financial accitions. If you have king account: thing account: things account: things account:	counts; certif e multiple acc	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit uni	Cash	\$	0.0
Cash	✓ No Yes Deposits of money Examples: Checking, savings, or oth and other similar institution No Yes 17.1. Checking, savings, or oth and other similar institution 17.2. Checking, savings, or oth and other similar institution 17.3. Saving 17.4. Saving 17.5. Certification 17.6. Other for the saving of the saving o	ther financial accitions. If you have king account: thing account: things account: things account:	counts; certif e multiple acc	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit uni	Cash	\$	0.0
certificates of deposit; shares in credit unions, brokerage houses, e accounts with the same institution, list each. titution name: rst Merchants \$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Yes	ther financial accitions. If you have king account: tking account: ngs account:	counts; certif e multiple acc Institutio	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit unio	ons, brokerage l		0.0
certificates of deposit; shares in credit unions, brokerage houses, e accounts with the same institution, list each. titution name: rst Merchants \$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Deposits of money Examples: Checking, savings, or oth and other similar institution. No Yes 17.1. Checking, 17.2. Checking, 17.3. Saving, 17.4. Saving, 17.5. Certification, 17.6. Other for 17.8. Other for 17.9. Other f	ther financial accitions. If you have king account: tking account: ngs account:	counts; certif e multiple acc Institutio	ficates of depo counts with th on name:	oosit; shares i he same insti	in credit unio	ons, brokerage l		
titution name: rst Merchants \$ 125. \$ 7. \$ 7. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 9	Examples: Checking, savings, or oth and other similar institution	tions. If you have king account: king account: ngs account:	e multiple aci	counts with th	he same insti			houses,	
titution name: rst Merchants \$ 125. \$ 7. \$ 7. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 8. \$ 9	Examples: Checking, savings, or oth and other similar institution	tions. If you have king account: king account: ngs account:	e multiple aci	counts with th	he same insti			houses,	
rst Merchants \$ 125. \$ \$ <td>Yes</td> <td>eking account:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Yes	eking account:							
rst Merchants \$ 125. \$ \$ <td>17.1. Checki 17.2. Checki 17.3. Saving 17.4. Saving 17.5. Certific 17.6. Other f 17.7. Other f 17.8. Other f</td> <td>eking account:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	17.1. Checki 17.2. Checki 17.3. Saving 17.4. Saving 17.5. Certific 17.6. Other f 17.7. Other f 17.8. Other f	eking account:							
\$ \$	17.2. Checki 17.3. Saving 17.4. Saving 17.5. Certific 17.6. Other f 17.7. Other f 17.8. Other f	eking account:	First N	Merchants					
\$ \$	17.3. Saving 17.4. Saving 17.5. Certific 17.6. Other f 17.7. Other f 17.9. Other f	ngs account:						\$	125.
\$\$	17.4. Saving 17.5. Certific 17.6. Other f 17.7. Other f 17.8. Other f	ngs account:						s	
\$	17.5 Certific 17.6 Other f 17.7 Other f 17.8 Other f	_						s	
	17.6. Other f 17.7. Other f 17.8. Other f			17				s	
	17.7. Other f	ficates of deposit:						s	
s	17.8. Other f	r financial account	t:					\$	
	17.9. Other f	r financial account	t::::		W			s	
ss		r financial account	t:					s	
		r financial account	t:					s	
	ionds, mutual funds, or publicly tr	traded stocks						350	
e firms, money market accounts	xamples: Bond funds, investment a		okerage firm	is, money ma	arket account	ts			
	☐ Yes Institution of	or issuer name:							
					.			s	
s								s	
								s	
e firms, money market accounts	18. Bonds, mutual funds, or publicly tr Examples: Bond funds, investment ac No Pes Institution or	r financial account traded stocks accounts with bro or issuer name:	t:	ns, money ma	arket account	ts			ss
								s	
s								s	

Debtor 1	Francisco Fest Name		Case number (if known)	
20. Causes				4
Negotia	ble instruments	include personal chec	er negotiable and non-negotiable instruments cks, cashlers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering hem.	
infor	Give specific	Issuer name:		
then	N	5		5
				5
Example	nent or pension es: Interests in II		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	List each	Type of account:	Institution name:	
		401(k) or similar plan:	401(k)	s 20.00
		Pension plan		\$
		IRA:		•
		Retirement account		s
		Keogh		\$
		Additional account:		\$
		Additional account:		\$
Your sha Example	deposits and pare of all unused es: Agreements ies, or others	depositsyou have m	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	
☑ No				
☐ Yes		Ins	stitution name or individual:	
		Electric:	272	\$
		Gas:		\$
			otal unit	\$
		Prepaid rent:		\$ \$
		Telephone:		s
		Water:		\$
		Rented furniture:		\$
		Other:		\$
	s (A contract for	a periodic payment o	of money to you, either for life or for a number of years)	
Ø No				
☐ Yes		Issuer name and desc	cription:	
				\$ \$
				s

Debtor 1 Francisco Uribe	Case n	umber (# known)	
First Name Middle Name	Lest Name		
	ount in a qualified ABLE program, or under a qualif	ied state tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(b), and 529	(b)(1).		
☑ No			
Yes Institution	name and description. Separately file the records of an	y interests.11 U.S.C. § 521(c):
		_	3
			\$
			s
5. Trusts, equitable or future interests in p	property (other than anything listed in line 1), and ri	ghts or powers	
exercisable for your benefit			
2 No			
Yes. Give specific			
information about them			_ s
6. Patents, copyrights, trademarks, trade	cacrate, and other intellectual property		
	tes, proceeds from royalties and licensing agreements		
☑ No			
Yes, Give specific			
information about them			s
7. Licenses, franchises, and other genera			
Examples: Building permits, exclusive lice	nses, cooperative association holdings, liquor licenses,	professional licenses	
2 No			
Yes. Give specific			
information about them			\$
	7000		
loney or property owed to you?			Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
Tax refunds owed to you			
□ No			
Yes. Give specific information	2017 State of Illinois Refund \$109.00	Federal:	s 109+
about them, including whether you already filed the returns	Anticipated 2018 tax refund	State:	s 109+
and the tax years.	, ·	100	•
		Local	<u>, </u>
Family support	and a second at the second and second at the second at		
No	spousal support, child support, maintenance, divorce s	ement, property settleme	eni
☐ Yes. Give specific Information		Alimony:	\$
		Maintenance	s
		Support	s
		Divorce settlement:	s
			\$
		Property settlement:	4
Other amounts someone owes you	man naumanta dinaktita. Laanita 1991		
Social Security benefits; unpail	nce payments, disability benefits, sick pay, vacation pa d loans you made to someone else	y, workers compensation,	
☑ No	•		
Yes. Give specific information			7
•			\$

	First Name Middle Name	Last Name	Case number (# known)	
1. Interest	s in insurance policies			
		ince; health savings account (H	(A); credit, homeowner's, or renter's insurance	
No			- X	
☐ Yes	Name the insurance company	Company name:	Beneficiary:	Surrender or refund value
	of each policy and list its value			
				5
				\$
				\$
If you an	erest in property that is due you e the beneficiary of a living trust, because someone has died.		rance policy, or are currently entitled to receive	
	Give specific information			-
u res	Give specific information			s
	against third parties, whether c s: Accidents, employment disput	_	or made a demand for payment sue	
Yes.	Describe each daim			
				S
to set of	entingent and unliquidated clai if claims	ms of every nature, including	counterclaims of the debtor and rights	
Yes.	Describe each claim			
	ncial assets you did not alread	ly list		
2 No	Give specific information			1.
2 No				\$
No Yes.	Give specific informationdo	es from Part 4, including any	entries for pages you have attached	\$\$\$
No Yes.	Give specific informationdo	es from Part 4, including any		ss254.54
☑ No □ Yes. 6. Add the for Part	Give specific informationdollar value of all of your entri	es from Part 4, including any	→	
☑ No ☐ Yes. 6. Add the for Part	Give specific informationdollar value of all of your entri	es from Part 4, including any		
☑ No ☐ Yes. 6. Add the for Part	Give specific informationdollar value of all of your entri	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	\$\$\$s254.54
No Yes, Add the for Part	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business we or have any legal or equita Go to Part 6.	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	
No Yes. Add the for Part. Do you co	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business wn or have any legal or equita	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	
No Yes, Add the for Part	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business we or have any legal or equita Go to Part 6.	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	real estate in Part 1 Current value of the
No Yes, Add the for Part	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business we or have any legal or equita Go to Part 6.	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	Current value of the portion you own?
No Yes. Add the for Part. Do you co	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business we or have any legal or equita Go to Part 6.	es from Part 4, including any Related Property You	→ Own or Have an Interest In. List any r	Current value of the portion you own?
No Yes. Add the for Part. Do you co. Yes.	Give specific informationdollar value of all of your entri 4. Write that number here Describe Any Business we or have any legal or equita Go to Part 6.	es from Part 4, including any Related Property You (→ Own or Have an Interest In. List any r	Current value of the portion you own? Do not deduct secured claim
No Yes. Add the for Part	dollar value of all of your entri 4. Write that number here Describe Any Business wn or have any legal or equita to to Part 6. Go to line 38.	es from Part 4, including any Related Property You (→ Own or Have an Interest In. List any r	Current value of the portion you own? Do not deduct secured claim
No Yes. Add the for Part of No. Counts Accounts	dollar value of all of your entri 4. Write that number here Describe Any Business wn or have any legal or equita to to Part 6. Go to line 38.	es from Part 4, including any Related Property You (→ Own or Have an Interest In. List any r	Current value of the portion you own? Do not deduct secured claim
No Yes. Add the for Part of No. O Yes. Accounts No Yes.	Give specific information	es from Part 4, including any Related Property You (→ Own or Have an Interest In. List any r	Current value of the portion you own? Do not deduct secured claim
No Yes. Add the for Part of P	Give specific information	es from Part 4, including any Related Property You (→ Own or Have an Interest In. List any r	Current value of the portion you own? Do not deduct secured claim or exemptions.
No Yes. Add the for Part of P	Give specific information	es from Part 4, including any Related Property You (Own or Have an Interest In. List any related property?	Current value of the portion you own? Do not deduct secured claim or exemptions.

Official Form 106A/B

Schedule A/B: Property

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D'ODIOI I	rancisco L				Case number (# ki	nown)	
	First Name	Meldle Name	Last Name				
40 Machinen	flytures on	ulament cupali	ac vou uco in h	usiness, and tools of	vous trado		
□ No	, iixtares, eq	arbureur, aubbu	ss you use in bu	usiness, and tools of	your dade		
Yes. De	escribe						
- 103.00					220-000		S
41.Inventory	_						
Yes. De	escribe						S
	_				10,100		
42. Interests In	partnership	s or joint ventu	res				
☐ No							
Yes De	scribe	Name of entity:				% of ownership:	
						%	s
	-					%	\$
						%	\$
42 Cuetaman li	iota —	lists, or other o					
No D No	ists, maning	lists, or other c	ompliations				
Yes. Do	your lists in	nclude personal	ly identifiable in	nformation (as defined	in 11 U.S.C. § 101(41A)))?	
	No			SALEN TO AND SO			
	Yes, Descri	be					s
44 Any busine	ss-related p	roperty you did	not already list				
□ No							
Yes, Giv	ve specific tion						\$
i i i i i i i i i i i i i i i i i i i							s
							\$
	•			·			\$
	-						\$
							· ·
							\$
					for pages you have att		s O
for Part 5. \	Write that nu	ımber here					
Part 6: De	escribe An	v Farm, and C	ommercial Fis	shing.Related Prop	erty You Own or Ha	va an Interact i	le.
			in farmland, list		only fou own or the	ve an interest i	••••
_		y legal or equita	ble interest in a	any farm- or commerc	ial fishing-related prop	erty?	
No. Go							
- 165, G0	7 10 HIE 4/1						Comment on the set the
							Current value of the portion you own?
							Do not deduct secured claims
47. Farm anima	als						or exemptions.
		ultry, farm-raised	i fish				
□ No							
Yes	······						
							s
	_						A more and a

Official Form 106A/B

Schedule A/B: Property

page 9

	cisco Uribe	Case number (# known)			
First Nav	ne Mddie Name Last Name				
48 Crops—either gr	rowing or harvested				
□ No				1	
Yes. Give specific information				s	
49. Farm and fishing No Yes	g equipment, implements, machinery, fixtu	res, and tools of trade			
- 103,				s_	
50, Farm and fishing	g supplies, chemicals, and feed				
□ No					
☐ Yes				s	
51 Any farm- and co	ommercial fishing-related property you did	I not already list		3 —	
□ No		Thot alleady list			
Yes. Give speinformation				s	
		iding any entries for pages you have attached			0.00
for Part 6. Write	that number here				
Part 7: Descr	ibe All Property You Own or Have	e an Interest in That You Did Not List	Above		
	er property of any kind you did not alread	y list?			
✓ No	lickets, country club membership				
Yes. Give spe				S _	
anothasot				5	
				(2)	0.00
54 Add the dollar va	alue of all of your entries from Part 7. Write	that number here	······	\$_	0.00
Part 8: List th	e Totals of Each Part of this For	m			
55 Part 1: Total real	estate, line 2			\$	137,790.00
56. Part 2: Total vehi	icles, line 5	s3,041.00		Milliolada atado redisfrad	
57. Part 3: Total pers	sonal and household items, line 15	\$825.00			
58 Part 4: Total fina	ncial assets, line 36	s254.54			
59 Part 5: Total bus	iness-related property, line 45	s0.00			
60 Part 6: Total farm	n- and fishing-related property, line 52	s 0.00			
	er property not listed, line 54	+s 0.00			
	1	4 120 54	_		4 400 = 4
62. Total personal pr	roperty. Add lines 56 through 61.	\$ 4,120.54 Copy personal proper	ty total ⋺	+s	4,120.54
63 Total of all prope					
	rty on Schedule A/B. Add line 55 + line 62.			s	141,910.54

Fill in this inform	ation to identify your case:			
Deptol (ncisco Uribe			
Debtor 2	larne Middle Name	Last Neme		
(Spouse, if filing) First N		Last Name		
United States Bankn	uptcy Court for the: Southern Dist	rict of Indiana		
Case number (If known)				Check if this is ar amended filing
			뜋	
Official For	m 106C			
Schedul	e C: The Pro	nerty You	Claim as Exemp	12/45
		21/	•	
Using the property y space is needed, fill your name and case	ou listed on Schedule A/B: Pro, out and attach to this page as a number (if known).	perty (Official Form 106A many copies of <i>Part 2: Ad</i>	pether, both are equally responsible for (B) as your source, list the property the dditional Page as necessary. On the to mount of the exemption you claim.	nat you claim as exempt. If more op of any additional pages, write
retirement funds— limits the exemption would be limited to	may be unlimited in dollar an on to a particular dollar amou the applicable statutory amo	nount. However, if you on the pount.	health aids, rights to receive certal claim an exemption of 100% of fair to property is determined to exceed th	market value under a law that
Part 1: Identi	fy the Property You Claim	n as Exempt		
1. Which set of e	xemptions are you claiming?	Check one only, even if	your spouse is filing with you.	
☑ You are cla	iming state and federal nonbar	kruptcy exemptions. 11 l		
☐ You are cla	iming federal exemptions. 11 U	J.S.C. § 522(b)(2)		
2. For any prope	rty you list on <i>Schedule A/B</i> t	hat you claim as exemp	ot, fill in the information below.	
	ion of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	ın.
Brief	Household Goods	s 500.00	☑ s 500.00	I.C.34-55-10-2(c)(2)
description: Line from	_	•	100% of fair market value, up to	
Schedule A/B:	6		any applicable statutory limit	
Brief	Electronics	s 75.00	☑ \$75.00_	I.C. 34-55-10-2(c)(2
description: Line from	7	·	100% of fair market value, up to any applicable statutory limit	
Schedule A/B.			, I	.C. 34-55-10-2(c)(2)
Brief	Clothina	s 250.00	☑ s 250.00	
	Clothing 11	s_250.00	✓ s 250.00 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B. 3. Are you claim	11ing a homestead exemption of	of more than \$155,675?	 ✓ \$ 250.00 ☐ 100% of fair market value, up to 	
Brief description: Line from Schedule A/B. 3. Are you claim (Subject to adjust No	ing a homestead exemption oustment on 4/01/16 and every 3	of more than \$155,675? years after that for case	100% of fair market value, up to any applicable statutory limit	ent.)

Deptot i	rancisco Uribe	Name	Case number (# known)	
Part 2: Add	ditional Page			
	ription of the property and line le A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Bank	s <u>125.54</u>	☑ s <u>125.54</u>	I.C. 34-55-10-2(c)(3)
Line from Schedule A	/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Cash	s <u> </u>	⊿ s0.00	I.C. 34-55-10-2(c)(3)
Line from Schedule A	/B. ——		☐ 100% of fair market value, up to any applicable statutory limit	· · · · · · · · · · · · · · · · · · ·
Brief description:	401(K)	s20.00	√ s20.00	I.C.34-55-10-2(c)(6)
Line from Schedule A	/B: ——		100% of fair market value, up to any applicable statutory limit	
Brief description:	Tax Refunds	s109+	☑s109+	I.C. 34-55-10-2(c)(11)
Line from Schedule A	/B:		□ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	0 s	
Line from Schedule A	/B: ——		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A	/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A	/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A	/B: ——		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A	/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	ģ. ————————————————————————————————————	\$	□ s	
Line from Schedule A	/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A	/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A	/B:		☐ 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your cas-	e:			
Debtor 1 Francisco Uribe				
First Name Middle N. Debtor 2	sme Last Name			
(Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: Southern	District of Indiana			
Case number				
(If known)				f this is an
			amende	ea ming
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	ed by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filling together, both are eq	ually responsible fo	or supplying correct	
additional pages, write your name and cas	the Additional Page, fill it out, number the entries, a e number (if known).	ind attach it to this	form. On the top of	any
Do any creditors have claims secured by No. Check this hox and submit this form	y your property? I to the court with your other schedules. You have nothi	og else to report on t	nis form	
Yes. Fill in all of the information below.	to the court with your office salication. For here hours	ig else to report on a	iis ioiiti.	
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has m	ore than one secured daim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor ha	as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	abetical order according to the creditor's name.	value of collateral.	claim	If any
Wells Fargo Home Mortgage	Describe the property that secures the claim:	s90,415.00	s_ 137,790.00	0.00
Creditor's Name PO Box 10335	2061 W. Canal St., Blue Island, IL 60406			
Number Street	200 17. 00110. 01., 5.00 /5.010, 12 00 700			
	As of the date you file, the claim is: Check all that apply.			
Des Moines IA 50306	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	•		
community debt				
Date debt was incurred 10/2/07	Last 4 digits of account number 7 4 6 9			
2.2	Describe the property that secures the claim:	\$	\$	5
Creditor's Name	-			
Number Street				
<u> </u>	As of the date you file, the claim is: Check all that apply.			
	Contingent Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check If this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	§ <u>90,415.00</u>		

se this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection gency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, but have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons anotified for any debts in Part 1, do not fill out or submit this page.	Francisco Uribe			Case number (if known)
This page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection series is trying to collect from you for a debt you over to someone dete, list the creditor in Part 1, and then list the collection series by the young of the part 1, and then list the collection series by our one to be notified for any debts in Part 1, do not fill out or autenit this page. Sean Jordan (Anselmo Lindberg & Assoc. LLC) Name Street Sulte 120 Naperville IL 60563 City Suste ZiP Code On which line in Part 1 did you enter the creditor? Lest 4 digits of account number				
See String to collect from you for a dobt you ove to a memore deal, list the creditor in Part 1, and then list the collection grow have. Similarly a but we more than one criditor for any debts in Part 1, do not fill out or submit this page. Sean Jordan (Anseimo Lindberg & Assoc. LLC)	List Others to Be Noti	fied for a Debt	That You Already	Listed
Name Number Street City State ZiP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 7 4 6 9 On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number gency is trying to collect from you for ou have more than one creditor for an	a debt you owe to y of the debts that	someone else, list the you listed in Part 1, I	e creditor in Part 1, and then list the collection agency here. Similarly,	
Name Number Street City State ZiP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number 7 4 6 9 On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Sean Jordan (Anselmo Lindi	perg & Assoc.	LLC)	On which line in Part 1 did you enter the creditor? $\frac{2.1}{}$	
Number Street Number Street Suite 120	Name			
Suite 120 Naperville IL 60563 State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number				
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number				
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number	Naperville	IL	60563	
Name Last 4 digits of account number				
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number				On which line in Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor?	Name			Last 4 digits of account number
City State ZIP Code On which line in Part 1 did you enter the creditor?	Al			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number	Number Street			
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Name Last 4 digits of account number	City	State	ZIP Code	-0 "
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Number Street				On which line in Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number	Name			Last 4 digits of account number
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number Number Street On which line in Part 1 did you enter the creditor? Last 4 digits of account number	Number Street			20 00 00 00 00 00 00 00 00 00 00 00 00 0
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number	Number Street			
Name Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number On which line in Part 1 did you enter the creditor? Last 4 digits of account number				
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor?	City	State	ZIP Code	
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name				On which line In Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number	Name			Last 4 digits of account number
City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number City State ZIP Code On which line in Part 1 did you enter the creditor? Last 4 digits of account number Last 4 digits of account number	Number Street			23
Name City State ZIP Code				
Name City State ZIP Code				73
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number Number Street	City	State	ZIP Code	7/
Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number				On which line in Part 1 did you enter the creditor?
City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number Number Street	Name			Last 4 digits of account number
Name On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street	Number Street			-y
Name On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street				
Name On which line in Part 1 did you enter the creditor? Last 4 digits of account number Number Street			710.0.1	-
Name Last 4 digits of account number	City	State	ZIP Code	
Number Street	None			
	NAME			Last 4 digits of account number
City State ZIP Code	Number Street			-
	City	State	7IP Code	

Fill in this information to identify your case:	1.34			
Debtor 1 Francisco Uribe				
First Name Middle Name	Last Neme			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Southern District	or Indiana		D Char	ck if this is an
Case number (If known)				nded filing
(n violet)			unto	naca iiing
Official Form 106E/F				
	/ho Have Unsecured Claim	ıs		12/15
	1 for creditors with PRIORITY claims and Part 2 for		NONPRIORI	Y claims.
List the other party to any executory contracts or u	nexpired leases that could result in a claim. Also ils	t executory co	ntracts on S	chedule
A/B: Property (Official Form 105A/B) and on Sched creditors with partially secured claims that are lists	ule G: Executory Contracts and Unexpired Leases (C d in Schedule D: Creditors Who Have Claims Secur	Official Form 10	16G). Do not	include any
needed, copy the Part you need, fill it out, number	the entries in the boxes on the left. Attach the Contin	uation Page to	this page. (On the top of
any additional pages, write your name and case nu	mber (if known).			
Part 1: List All of Your PRIORITY Unsecur	ed Claims			
				.
 Do any creditors have priority unsecured claims No. Go to Part 2. 	s against you?			
Yes.		4		
	editor has more than one priority unsecured claim, list th	o craditor cono	rataly for and	alaim Cor
each daim listed, identify what type of claim it is. If	a claim has both priority and nonpriority amounts, list that	at claim here an	d show both	priority and
nonpriority amounts. As much as possible, list the o	claims in alphabetical order according to the creditor's na	me. If you have	more than to	vo priority
(For an explanation of each type of claim, see the i	Part 1. If more than one creditor holds a particular claim	, list the other c	reditors in Pa	rt 3.
(1 of all explanation of each type of challif, see the f	instructions for this form in the instruction booklet.)	Total claim	Priority	Nonpriority
		Total Cigiti	amount	amount
2.1	S			
Priority Creditor's Name	Last 4 digits of account number	2	. \$	_ \$
2003.	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply			
City State ZIP Code	Contingent			
Who incurred the debt? Check one	Unliquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were			
Is the claim subject to offset?	intoxicated Other. Specify			
☐ Yes	C Office: Specify			
2.2				
Priority Creditor's Name	Last 4 digits of account number	S	. \$	_ \$
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check If this claim is for a community debt	intoxicated			
Is the claim subject to offset?	Other, Specify			
□ No		-		

Debt	or 1 Francisco Uribe Frat Neme Matdie Name Last Name	Case number (//anown			
Par	t 1: Your PRIORITY Unsecured Claims	s — Continuation Page			
Afte	ir listing any entries on this page, number then	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
	Priority Creditor's Name	Last 4 digits of account number	5	_ \$	_ \$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		_			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
	100	☐ Disputed			
	Who incurred the debt? Check one. Debtor 1 only	Tune of PRIORITY annual design			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations Taxes and certain other debts you owe the government			
	At least one of the debtors and another	claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other Specify			
	Is the claim subject to offset?				
	□ No				
_	☐ Yes				
		Last 4 digits of account number	\$. \$	5
	Priority Creditor's Name				
	Number Street	When was the debt incurred?			
	3,100	As of the date you file, the claim is: Check all that apply.			
		-			
	City State ZIP Code	Contingent Unliquidated			
	State ZIP CODE	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
		Claims for death or personal injury while you were			
	Check if this claim is for a community debt	intoxicated Other. Specify			
	is the claim subject to offset?				
	☐ No ☐ Yes				
		Last 4 digits of account number	s	s	s
	Priority Creditor's Name	Last 4 digits of account number	-	- *	
	Number Street	When was the debt incurred?			
	The state of the s	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
		Disputed			
	Who incurred the debt? Check one	·			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	_	Claims for death or personal injury white you were			
	☐ Check if this claim is for a community debt	Intoxicated Other, Specify			
	Is the claim subject to offset?				
	□ No				
	T ver				

Det	Francisco Uribe	ATT-0	Case number (# known)	104	
р.					
Pa	List All of Your NONPRIORITY U	nsecured Claim:			
3.	Do any creditors have nonpriority unsecured				
	No. You have nothing to report in this part. ₹Yes	Submit this form to t	he court with your other schedules.		
4.	nonpriority unsecured claim, list the creditor seg	arately for each cla	I order of the creditor who holds each claim. If a creditor hat im. For each claim listed, identify what type of claim it is. Do no , list the other creditors in Part 3.ff you have more than three no	t list cla	aims already
				Tot	al claim
4.1	ACME Continental Credit Union		Last 4 digits of account number 2 3 1 2		044.04
	Nonpriority Creditor's Name		When was the debt incurred? 8/4/2012	\$	311.21
	55 E. Jackson Boulevard		When was the debt incurred?		
	Chicago IL	60604			
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply		
			Contingent		
	Who Incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	☐ Check if this claim is for a community deb	•	Obligations arising out of a separation agreement or divorce		
			that you did not report as priority claims		
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other, Specify Credit Union	š	
	Yes		- Outsit opacity		
4.2	Atlantia Cradit and Finance Inc		Last 4 digits of account number 9 0 0 6		11,370.39
7.4	Atlantic Credit and Finance, Inc.		Last 4 digits of account number 9 0 0 6 When was the debt incurred? 9/2/2014	•—	11,010.00
	PO Box 2001				
	Number Street		_		
	Warren MI	48090 ZIP Code	As of the date you file, the claim is: Check all that apply.		
		217 0000	☐ Contingent☐ Unliquidated		
	Who incurred the debt? Check one. ☑ Debtor 1 only		Disputed		
	Debtor 2 only				
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another		Student loans		
	☐ Check if this claim is for a community debi	t	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	5	
	☑ No		Other, Specify Credit Card		
	☐ Yes				
4.3	Avon Village Mobile Home Park		Last 4 digits of account number 3 8 6 5		2,700.00
	Nonpriority Creditor's Name		When was the debt incurred? 09/2017	\$	2,700.00
	235 Avon Village Drive Number Street				
	Avon IN	46123	A - Fabruary		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.		Contingent		
	Debtor 1 only		☐ Unliquidated ☐ Disputed		
	Debtor 2 only		— e-up a sara		
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim:		
			Student loans		
	☐ Check if this claim is for a community debt	t	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	5	
	V No □ Yes		Other Specify <u>Lease</u>		
	5.77				

Deb	tor 1 Francisco Uribe	Last Name	Mar Als	Case number (# known)	
Pa	rt 2: Your NONPRIORITY Unse	cured Cl	aims — Continu	uation Page	
Aft	er listing any entries on this page, nu	mber the	n beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.4	Blue Island Hospital Company	LLC		Last 4 digits of account number 5 6 0 7	s 732.41
	62592 Collection Center Drive			When was the debt incurred? 2017	
	Number Street Chicago	IL	60693	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans	
	Check if this claim is for a commun			Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No Yes			Other Specify Medical Bill	
4.5	Blue Island Hospital Company	LLC		Last 4 digits of account number 9 7 7 9	s 286.56
	Nonpnority Creditor's Name 62592 Collection Center Drive			When was the debt Incurred? 5/13/2017	
	Number Street Chicago	IL	60693	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community the claim subject to offset?	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill	
4.6				Last 4 digits of account number	s_ 3,613.00
	Capital One Nonpriority Creditor's Name PO Box 30281			When was the debt incurred? 8/4/2012	
	Number Street Salt Lake City	UT	84130	As of the date you file, the claim is: Check all that apply.	
	City Who Incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community the claim subject to offset?	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Credit Card	
	☑ No				

Deb	tor 1 Francisco Uribe First Name Middle Name Last Name		Case number (#known)	
Pa	rt 2: Your NONPRIORITY Unsecured Claim	ns — Continua	tion Page	
Aft	er listing any entries on this page, number them b	eginning with 4	.4, followed by 4.5, and so forth.	Total claim
4.7	City of Blue Island, Illinois		Last 4 digits of account number 7 5 2 6	s100.00
	13051 S. Greenwood Avenue		When was the debt incurred? 09/2017	
	Number Street Blue Island IL	60406	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only	IP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes		 □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Utility (water) 	
4.8	ComEd		Last 4 digits of account number 1 0 0 7	\$ 200.00
	Nonpriority Creditor's Name PO Box 805379		When was the debt incurred? 09/2017	
		60680	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	IP Code	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?		□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Utility (electric)	
	☑ No □ Yes			
4.9	Comenity Capital Bank		Last 4 digits of account number 9 0 0 6	s_11,370.39
	PO Box 183003		When was the debt incurred? 9/2/2014	
		43218	As of the date you file, the claim is: Check all that apply.	
	Who Incurred the debt? Check one.	IP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify Credit Card	
	Ø No □ Yes		₩ Omer, specify Orean Ogia	

Del	otor 1 Francisco Uribe		Case number (# known)	
Pz	irt 2: Your NONPRIORITY Unsecured Cl	alms — Contin	uation Page	
Af	er listing any entries on this page, number the	m beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
4_10	ComenityCapital/TYRDVS		Last 4 digits of account number	_{\$} 10,959.00
	Nonpriority Creditor's Name		When was the debt incurred? 09/02/2014	
	PO Box 182120 Number Street			
	Columbus OH	43218	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		C Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other Specify Credit Card	
	₩ No			
	☐ Yes			
4.11	DuPage Medical Group		Last 4 digits of account number 4 6 8 6	s <u>488.33</u>
	15921 Collections Center Drive		When was the debt incurred? 2017	
	Number Street		-	
	Chicago IL	60693	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one		☐ Unliquidated☐ Disputed	
	☑ Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check If this claim is for a community debt		you did not report as priority claims	
	Is the claim subject to offset?		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill 	
	☑ No		Other, Specify Westers of	
	Yes			
440				00.00
4.12	l EMP of Blue Island, LLC		Last 4 digits of account number 6 3 8 5	\$30.33
	Nonpriority Creditor's Name	· · · ·		
	PO Box 19000		When was the debt incurred? 5/13/2017	
	Number Street Belfast ME	04045	As of the date you file, the claim is: Check all that apply	
	City State	04915 ZIP Code	Contingent	
			Unliquidated	
	Who incurred the debt? Check one		☐ Disputed	
	Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset?		Other. Specify Medical bill	
	☑ No			

Debi	or 1 Francisco Uribe	Last Name		Case number (# Anown)		
Pai	t 2: Your NONPRIORITY Uns	ecured Cla	sims — Continu	uation Page		
Afte	er listing any entries on this page, n	umber then	n beginning with	4.4, followed by 4.5, and so forth.	То	tal clalm
4.13	Hematogenix Laboratory Ser	vices, LL(Last 4 digits of account number 2 7 6 1	s_	45.05
	8150 West 185th Street, Ste.	A		When was the debt incurred? 01/31/2017		
	Number Street Tinley Park	IL	60487	As of the date you file, the claim is: Check all that apply		
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans		
	☐ At least one of the debtors and anothe☐ ☐ Check if this claim is for a commit			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? No Yes			Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical bill		
4.14				Last 4 digits of account number 6 1 2 8		312.00
	Illinois Tollway Nonpriority Creditor's Name	-			3	312,00
	PO Box 5201			When was the debt incurred? 2008		
	Number Street Lisle	IL	60532	As of the date you file, the claim is: Check all that apply.		
	Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check If this claim is for a commits the claim subject to offset? ☑ No ☐ Yes	unity debt		Debts to pension or profit-sharing plans, and other similar debts Other Specify Toll Road Fees		
4,15	IMC Credit Services	N		Last 4 digits of account number 3 0 5 8	\$	28.20
	PO Box 20636			When was the debt incurred? 2017		
	Number Street Indianapolis	IN	46220	As of the date you file, the claim is: Check all that apply.		
	City Who Incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed		
	Debtor 1 only					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	er		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a comme	unity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Specify Medical Bill		
	₩ No Pes			-		

Debt	Francisco Uribe Francisco Uribe Middle Name Last Name	- X	Case number (# known)	
Par	t 2: Your NONPRIORITY Unsecured Cl	aims — Continu	ation Page	
Afte	er listing any entries on this page, number ther	n beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.16	IMC Credit Services		Last 4 digits of account number 9 4 3 3	\$156.00
	Nonpriority Creditor's Name PO Box 20636		When was the debt incurred? 2017	
	Number Street Indianapolis IN	46220	As of the date you file, the claim is: Check all that apply	
	City State Who incurred the debt? Check one. Debtor 1 only	ZiP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this already to force any another.		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other, Specify Medical bill	
	Yes			
4.17	IMC Credit Services		Last 4 digits of account number 1 4 1 3	s <u>1,143.78</u>
	Nonpriority Creditor's Name PO Box 20636		When was the debt incurred? 2017	
	Number Street Indianapolis IN	46220	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt is the claim subject to offset?		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	
	☑ No □ Yes			
4.18	IU Health	<u></u>	Last 4 digits of account number 9 4 9 2	s34.80
	Nonpriority Creditor's Name 250 N. Shadeland Ave.		When was the debt incurred? 10/13/2017	
	Number Street		As of the date you file, the claim is: Check all that apply	
	Indianapolis IN City State	46219 ZIP Code	Contingent	
	Who incurred the debt? Check one.	211 5005	Unliquidated Disputed	
	Debtor 1 only		Time of NONDRIGERY	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		 Student loans Obligations arising out of a separation agreement or divorce that 	
	☐ Check if this claim is for a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset? No Ves		Other. Specify Medical bill	

Deb		Name	Case number (# known)	
Pa	Your NONPRIORITY Unsecured	Claims — Continu	ation Page	
Aft	er listing any entries on this page, number t	hem beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.19	Merchants' Credit Guide Co.		Last 4 digits of account number 0 8 2 0	s_ 488.33
	223 W. Jackson Blvd., #700		When was the debt incurred? 2017	
	Number Street Chicago IL	60606	As of the date you file, the claim is: Check all that apply	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this claim is for a community del	ot	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	is the claim subject to offset? No Yes		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other Specify Medical bill	
4.20	MetroSouth Medical Center		Last 4 digits of account number 5 6 0 7	s <u>732.41</u>
	62592 Collection Center Drive		When was the debt incurred? 2017	
	Number Street Chicago IL	60693	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?	ot	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical bill	
	☑ No □ Yes		other: Specify_IVIECTICAL OIII	
4.21	MetroSouth Medical Center	-	Last 4 digits of account number 9 7 7 9	_{\$} 286.56
	Nonpriority Creditor's Name 62592 Collection Center Drive		When was the debt incurred? 2017	
	Number Street Chicago IL	60693	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	Debtor 1 only		T(NONDRIOR)	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community del	ot	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ✓ No		Other. Specify Medical bill	

Deb	tor 1 Francisco Uribe Fest Name Middle Name	Lest Nam		Case number (if Anown)	
Pa	Your NONPRIORITY Unse	ecured C	aims — Contin	uation Page	
Aft	er listing any entries on this page, n	umber the	m beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
4.22	Midland Funding LLC			Last 4 digits of account number 9 0 0 6	s 11,370.39
	Nonpriority Creditor's Name PO Box 2001			When was the debt incurred? 09/02/2014	
	Number Street Warren	MI	48090	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a commits the claim subject to offset? No			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	
4.23	Nicor Gas Nonpriority Creditor's Name			Last 4 digits of account number 0 0 0 2 When was the debt incurred? 09/2017	s357.09
	PO Box 2020 Number Street Aurora City Who incurred the debt? Check one.	IL State	60507 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts other Specify Utility (gas)	
4.24	Northstar Anesthesia Of Illino	ois, LLC		Last 4 digits of account number 6 6 0 5	\$ <u>369.00</u>
	PO Box 612485			When was the debt incurred? 1/27/2017	
	Number Street Dallas City Who Incurred the debt? Check one.	TX State	75261 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt is the claim subject to offset? No			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical bill	

Debtor		ast Name	Case number (if known)	
Part :	2: Your NONPRIORITY Unsecure	ed Claims — Contin	nuation Page	
After	listing any entries on this page, numbe	r them beginning wi	th 4.4, followed by 4.5, and so forth.	Total claim
	Park Properties, Inc.		Last 4 digits of account number	s_52,080.0
	Ionpriority Creditor's Name 235 Avon Village Drive		When was the debt incurred? 09/2017	
	Avon IN	46123	As of the date you file, the claim is: Check all that apply.	
٧	Who incurred the debt? Check one.	B ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Ċ	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
ls S	Check if this claim is for a community of the claim subject to offset? No Yes	debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Lease	
.26	- 103			
	Professional Account Services		Last 4 digits of account number x x 1 1	s702.00
1	1359 E. Margaret Ave.		When was the debt incurred? 09/11/2017	
1	Terre Haute IN		As of the date you file, the claim is: Check all that apply.	
V	State Who Incurred the debt? Check one.	a ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Ė	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check If this claim is for a community of the claim subject to offset?	debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	
	No Yes			
	SYNCB/Care Credit onpriority Creditor's Name		Last 4 digits of account number 1 5 2 2	\$ 2,671.10
E	PO Box 965036		When was the debt Incurred? 3/23/16	
	umber Street Orlando FL	32896	As of the date you file, the claim is: Check all that apply	
	State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
			 Student loans Obligations arising out of a separation agreement or divorce that 	
		debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
V	s the claim subject to offset? Í No I Yes		Other Specify Credit Card	

Deb	tor 1 Francisco Uribe	d Name	Case number (# known)	1337
Pa	rt 2: Your NONPRIORITY Unsecure	d Claims — Contin	uation Page	
Aft	er listing any entries on this page, number	them beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
4.28	SYNCB/Wal-Mart DC		Last 4 digits of account number 5 7 6 0	s 4,030.00
	Nonpriority Creditor's Name PO Box 965036		When was the debt incurred? 12/12/2013	
	Number Street Orlando FL	32896	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community do is the claim subject to offset? No ☐ Yes	ebt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other Specify Credit Card	
4.29	Toyota Financial Services		Last 4 digits of account number 9 2 5 7	s_11,370.39
	PO Box 790069		When was the debt incurred? 09/02/2014	
	Number Street St. Louis MC	63179	As of the date you file, the claim is: Check all that apply	
	City State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community de is the claim subject to offset? ☑ No ☐ Yes	ebt C	Debts to pension or profit-sharing plans, and other similar debts Other, Specify Credit Card	
4.30	US Acute Care Solutions		Last 4 digits of account number 6 3 8 5	s 30.33
	Nonpriority Creditor's Name PO Box 14099		When was the debt incurred? 5/13/2017	
	Number Street Belfast ME	04915	As of the date you file, the claim is: Check all that apply.	
	City State Who incurred the debt? Check one.	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Student loans Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community do is the claim subject to offset? ✓ No	ebt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	

example, if a collection agence, then list the collection agence, then list the collection agence distinct the collection agence and the collection agence agency a	y is trying to ncy here. Sim	collect from yo ilarly, if you have	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or emore than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Edelstein & Edelstein			On which entry in Part 1 or Part 2 did you list the original creditor?
3825 W. Montrose			Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Clair
Chicago	IL State	60618 ZIP Code	Last 4 digits of account number 2 3 1 2
News			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	l		Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
No.			On which entry in Part 1 or Part 2 dld you list the original creditor?
Name	57		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Claims Part 2: Creditors with Nonpriority Unsecured
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Sudet.			Part 2: Creditors with Nonpriority Unsecured Claims
Сну	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1; Creditors with Priority Unsecured Claims Part 2; Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
14.			Claims Claims
City	State	ZIP Code	Last 4 digits of account number
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	Last 4 digits of account number
•			

Fill in	this in	iformation to i	identify your	case:		
Debto	r	Francisco U				
Debto		First Name	Me	Last Name		
		First Name		die Name Last Name		
United	1 States	Bankruptcy Court	t for the South	em District of Indiana		
Case ((If know	number wn)					Check if this is an amended filing
0.55		- 400	20			
		Form 106	_			
Sch	iedi	ule G: E	xecut	ory Contracts a	nd Unexpired Leases	12/15
1. Do	o you h No. C Yes. f st sepa	ges, write your ave any execu heck this box a fill in all of the i rately each pe	r name and countract and file this for information be erson or comp	ase number (If known). Its or unexpired leases? In with the court with your other is low even if the contracts or lease to any with whom you have the	schedules. You have nothing else to report on this for es are listed on Schedule A/B: Property (Official Form contract or lease. Then state what each contract of some in the instruction booklet for more examples of	m. 106A/B). or lease is for (for
Pe	erson o	r company wi	th whom you	have the contract or lease	State what the contract or lease is for	or
2.1						
Na	ame					
N	umber	Street				
Ci	ty		State	ZiP Code	_	
2.2						
100	ame		-			
Nı	umber	Street				
2.3	ty		State	ZIP Code		
_	ame				<u> </u>	
-						
Nt	ımber	Street				
Cit	ty	55 11 21000	State	ZIP Code		
2,4						
Na	ime					
NL	ımber	Street		2.4.4.94		
CH	ty .		State	ZIP Code		
2.5						
Na	ame					
Nu	ımber	Street				
Cit	.		State	ZIP Code		

Fill in this information to identify your case:		
Debtor 1 Francisco Uribe		
First Name Middle Name	Last Neme	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Southern District of II	ndiana	
Case number		
(If known)	Check if th	
0.00	amended (ning
Official Form 106H		
Schedule H: Your Codebtor	'S1	2/15
are filing together, both are equally responsible for su	or any debts you may have. Be as complete and accurate as possible. If two married pplying correct information. If more space is needed, copy the Additional Page, fill a the Additional Page to this page. On the top of any Additional Pages, write your national Pages.	It out.
1. Do you have any codebtors? (If you are filing a joint	t case, do not list either spouse as a codebtor.)	
☑ No □ Yes		
	unity property state or territory? (Community property states and territories include	
Arizona, California, Idaho, Louisiana, Nevada, New M	Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	
No. Go to line 3.		
Yes. Did your spouse, former spouse, or legal eq	uivalent live with you at the time?	
No	you live? Fill in the name and current address of that person	
Tes. In which community state or termiory aid	you live?, Fill in the name and current address of that person,	
Name of your spouse, former spouse, or legal equivalent		
marine or your spouse, former spouse, or legal equivalent		
Number Street		
City State	ZIP Code	
shown in line 2 again as a codebtor only if that pe	ude your spouse as a codebtor if your spouse is filing with you. List the person erson is a guarantor or cosigner. Make sure you have listed the creditor on fficial Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D,	
Column 1: Your codebtor	Column 2: The creditor to whom you owe the	debt
	Check all schedules that apply:	
3.1	Schedule D, line	
Name	☐ Schedule E/F, line	
Number Street	☐ Schedule G, line	
City State	ZIP Code	
3.2		
Name	Schedule D, line	
Number Street	Schedule E/F, line	
	□ Schedule G, line	
City State	ZIP Code	
3.3		
Name	☐ Schedule E/F, line	
Number Street	☐ Schedule G, line	
City	71D Code	

Schedule H: Your Codebtors

page 1 of 📗

Official Form 106H

Fill in this information to identify	your case:	_			
Debtor 1 Francisco Uribe					
Debtor 2	Maldie Name	Lest Neme			
(Spouse, if filing) Frat Name		Last Name			
United States Bankruptcy Court for the	Southern District of Indiana				
Case number(If known)				ck if this is:	
				in amended filing is supplement showing postpet	ition chapter 12
				ncome as of the following date	
Official Form 106I			Ñ	IM / DD / YYYY	
Schedule I: You	ır Income				12/15
Be as complete and accurate as possiblying correct information. If you are separated and your spot separate sheet to this form. On the Part 1: Describe Employm	ou are married and not filin use is not filing with you, di top of any additional page	g jointly, and you not include in	our spouse is living formation about you	with you, include information al ir spouse. If more space is need	bout your spouse. led, attach a
1. Fill in your employment					
information.		Debtor 1		Debtor 2 or non-filing	spouse
If you have more than one job, attach a separate page with	Employment status	☑ Employed		D. Sandana 4	
information about additional employers.	Employment status	Not employed	ved	☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.					
Occupation may include student or homemaker, if it applies.	Occupation	Material Han	dler		
	Employer's name	Dicks Merch	& Supply Chain	nc	
	Employer's address	345 Court St	reet		
		Number Street		Number Street	
			310		
		Coraopolis	PA 151		
	4	City	State ZIP Code	City Sta	ate ZIP Code
	How long employed there	? 6 months	-		
Part 2: Give Details About	Monthly Income				
	-	If you have not		ing write \$0 in the arrang land of	
Estimate monthly income as of spouse unless you are separated					your non-illing
If you or your non-filing spouse h below. If you need more space, a	avernore than one employer ttach a separate sheet to this	combine the info form.	ormation for all emplo	yers for that person on the lines	
	,		For Debto	r 1 For Debtor 2 or	
2. I let monthly error wasse set	on, and completely the F	all		non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly,			2 s 2389.	89 s	
3. Estimate and list monthly over	rtime pav.			00.00	
a. acarrage and nestronery will			<u> </u>	_ , ,	
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$ <u>2,389.</u>	<u>89</u> s	

Schedule I: Your Income

page 1

Official Form 1061

Debtor 1	Francisco Uribe First Name Middle Name Last Name		Ca	sse number (# kn	own)_			+	12
			For	Debtor 1		For Debtor 2 o			
Сор	by line 4 here	≯ 4.	\$_	2,389.89		S			
5. List	all payroll deductions:								
	. Tax, Medicare, and Social Security deductions	5a.	s	506.06		S			
	. Mandatory contributions for retirement plans	5a.	\$_ \$	0.00		4	_		
	Voluntary contributions for retirement plans	5c.	s_	0.00		S			
	Required repayments of retirement fund loans	5d.	3_ S	0.00		\$ \$			
	. Insurance	5e.	s_	171.06		\$			
			3_ S	0.00					
	Domestic support obligations	5f.		0.00		\$			
•	Union dues	5g.	5_			3			
5h.	Other deductions. Specify: Long Term Disability (LTD)	5h.	+\$_	7.97		+ s	_		
6. Ad	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$_	685.09		\$	_		
7. Cal	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,704.80		\$			
8. List	t all other income regularly received:								
8a.	Net income from rental property and from operating a business, profession, or farm								
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s_	0.00		s			
8b.	Interest and dividends	8b.	s	0.00		S			
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive	ent	-						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	s _	0.00		s			
8d.	Unemployment compensation	8d.	\$_	0.00		\$			
8e.	. Social Security	8e.	\$_	0.00		\$			
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$_	0.00		\$			
8g.	Pension or retirement income	8g.	s	0.00		s			
Rh	Other monthly income. Specify:	8h.	+5	0.00		+s			
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		1		_		
9. Add	d all other Income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	_s_	0.00		\$		_	
	culate monthly Income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	s_	1,704.80	+	\$		= s	1,704.80
Inclu	te all other regular contributions to the expenses that you list in Schelude contributions from an unmarried partner, members of your household, ands or relatives.			ents, your roo	mm	nates, and other			-
	not include any amounts already included in lines 2-10 or amounts that are cify:	not av	/ailable	e to pay expe	nse:	s listed in Scher	dule J. 11. ⁴	F s	0.00
	the amount in the last column of line 10 to the amount in line 11. The	rpenk	is the	combined or	neth-	ly income		т. Г	
	te that amount on the Summary of Your Assets and Liabilities and Certain S					•	12.	S.	1,704.80
	you expect an increase or decrease within the year after you file this No.	form?	1						onthly income
	Yes, Explain:								
					-				

Fill in this information to identify	your case:			
Debtor 1 Francisco Uribe	Mitidle Name Last Name	Check if thi	s is:	
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	— ☐ An ame	nded filing	
United States Bankruptcy Court for the:	Southern District of Indiana		ement showing post es as of the following	
Case number (If known)		MM / DD		y date.
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as point information. If more space is need (if known). Answer every question	ossible. If two married people are fill led, attach another sheet to this form	ing together, both are equally re n. On the top of any additional p	sponsible for supply ages, write your nam	ring correct ne and case number
Part 1: Describe Your Hou	usehold			
1. Is this a joint case?				
☑ No. Go to line 2.				
Yes, Does Debtor 2 live in a s	separate household?			
□ No				
Yes, Debtor 2 must fil	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	☑ No	Dependents relationship to	the condensate	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent In with you?
Do not state the dependents'	cash seperaent	• 0		□ No
names.				Yes
				□ No □ Yes
				□ No □ Yes
				_ ,
				□ No □ Yes
				- 103
				□ No □ Yes
3. Do your expenses include expenses of people other than	₩ No			u res
yourself and your dependents?	Yes			
Dart 2: Estimate Very Organ				/ (2) 265 SE E
	ing Monthly Expenses			
	bankruptcy filing date unless you a			
expenses as or a date after the bar applicable date.	nkruptcy is filed. If this is a supplem	ental Schedule J, check the box	at the top of the for	m and fill in the
ni i				
	n-cash government assistance if you d it on <i>Schedule I: Your Income</i> (Offi		Your expe	enses
	expenses for your residence. Include	•		
any rent for the ground or lot.	The state of the s	mot mongage payments and	4. S	725.00
If not included in line 4:				
4a Real estate taxes			4a \$	0.00
4b Property, homeowner's, or r	renter's insurance		4b. \$	17.00
4c. Home maintenance, repair,			4c. S	20.00
4d Homeowner's association of	• • •		4d. \$	0.00
Maria in the modernica of a social did in the interest of the	Constanting in Gues		4U. 3	0.00
Official Form 106J	Schedule J: Your	Expenses		page 1

page 1

De	btor 1 Francisco Uribe C	ase number (# known)		
	First Name Model Name Last Name			32
			Your expen	ses
5:	Additional mortgage payments for your residence, such as home equity loans	5.	s	0.00
6.	Utilities:			
1	6a Electricity, heat, natural gas	6a.	S	130.00
	6b. Water, sewer, garbage collection	6b.	S	45.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	100000
	6d. Other, Specify:	6d.	S	0.00
7		7.	S	275.00
8.	Childcare and children's education costs	8.	S	0.00
9.	Clothing, laundry, and dry cleaning	9.	s .	25.00
10.	Personal care products and services	10.	s	15.00
11.	Medical and dental expenses	11.	s	60.00
12.				222.22
	Do not include car payments.	12.	\$	200.00
13,	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	S	0.00
	15b. Health insurance	15b.	S	0.00
	15c. Vehicle insurance	15c.	\$	69.00
	15d. Other insurance, Specify:	15d	\$	0.00
16	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
10.	Specify:	16.	\$	0.00
17.				
17.0	17a. Car payments for Vehicle 1	17a.	S	0.00
	17b. Car payments for Vehicle 2	176.	s	0.00
	17c. Other Specify:	17c.	ss	0.00
	17d. Other Specify:	170	\$	0.00
18	Your payments of alimony, maintenance, and support that you did not report as ded your pay on line 5, Schedule I, Your Income (Official Form 106I).	ucted from 18.	\$ 0.00	
19.	Other payments you make to support others who do not live with you.			
	Specify:	19	\$ 0.00	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule	: I: Your Income.		
	20a. Mortgages on other property	20a	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d	\$	0.00
	20e. Homeowner's association or condominium dues	20e	s	0.00

Debtor 1	Francisco Uribe First Name Middle Name Last Name	Case number (# known)		
1, Other S	pecify: Pet Care & Tobacco	21.	+\$\$ 50.0	0
2. Calculat	e your monthly expenses.			
22a. Add	l lines 4 through 21.	22a.	\$	1,686.00
22b. Cop	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	_0.00
22c, Add	line 22a and 22b. The result is your monthly expenses.	22c	s	1,686.00
23. Calculate	your monthly net income.			4 70 4 00
23a. Coj	py line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,704.80
23b. Cop	py your monthly expenses from line 22c above.	23b.	-s	1,704.80
23c. Sub	otract your monthly expenses from your monthly income.			18.80
The	e result is your monthly net income.	23c.	3	10.00
4. Do you e	xpect an increase or decrease in your expenses within the year after you fi	le this form?		
	ple, do you expect to finish paying for your car loan within the year or do you exp payment to increase or decrease because of a modification to the terms of your	•		
Mo.				
Yes.	Explain here:			

Fill in this information to identify your case:	
Considera Usika	100
Debtor 1 Francisco Uribe Fest Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) Frat Name Middle Name Last Name	
United States Bankruptcy Court for the: Southern District of Indiana	
Case number(if known)	
	Check if this is an
	amended filing
Official Form 106Dec	
Declaration About an Individual Debtor's Schedules	12/15
If two married people are filing together, both are equally responsible for supplying correct information.	
Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ✓ No — Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Deci	laration and
Signature (Official Form 119).	o attori, and
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	
Signature of Debtor 1 Signature of Debtor 2	
022-18-	
Date	

Fill in Abin	information to ident	::f					ns www.m.w	
riii iii unis			ise:		-			
Debtor 1	Francisco Uribo	-	le Name		Last Name			
Debtor 2 (Spouse, if file	ing) First Name	Madel	le Name		Last Name			
	es Bankruptcy Court for the				Cart verily	-		
		ie. Codino	on District Of	III				
(If known)	er							Check if this is an
								amended filing
Official	Form 107							
Stater	nent of Fin	ancia	l Affai	rs fo	r Indiv	iduals Filing f	or Bankruptcy	12/1
nformation	plete and accurate as i. If more space is no known). Answer ever Give Details Abo	eeded, atta y question	ach a separ n.	ate shee	t to this for	m. On the top of any addit	ly responsible for supplyin donal pages, write your na	g correct me and case
1. What is	s your current marita	l status?					-	
☐ Ma	med t married							
	s. List all of the places	you lived i	n the last 3	Date	not include s Debtor 1 there	where you live now. Debtor 2:		Dates Debtor 2 lived there
						Same as Debtor 1		Same as Debtor
	2061 W. Canal St			. From	10/2007			F
1	lumber Street	•		. רוטווו To	09/2017	Number Street		From To
-				_				,0
_	Blue Island	IL	60406	_				
	City	State :	ZIP Code			City	State ZIP Code	
						Same as Debtor 1		☐ Same as Debtor
_	247 Avon Village I	Drive		From	09/2017			From
,	lumber Street			То	03/2018	Number Street		To
-				-				
_	Avon	IN	46123 ZIP Code	_		City	State ZIP Code	
	, ny	Oldic	LII 6005			City	State ZIF COUR	
states a	the last 8 years, did and territories include	you ever l Arizona, C	ive with a s alifomia, Ida	pouse o tho, Loui	r legal equi siana, Neva	valent in a community pro da, New Mexico, Puerto Ric	operty state or territory? (Co., Texas, Washington, and	ommunity property Wisconsin.)
☑ No								
☐ Yes	s. Make sure you fill ou	t Scheduk	9 H: Your Co	odebtors	(Official For	m 106H),		
Part 2:	Explain the Source	s of You	r Income					
ial Form 1	107	64		- 1	1 4 67 - 1 6	Individuals Filing for Bar		page 1

Nel you have any income from	st an frame amanathan a lee-	cinose dueles 451	on the two sendances and	melan unc 0
id you have any income from employmer ill in the total amount of income you receive you are filing a joint case and you have inco No Yes. Fill in the details.	d from all jobs and all busi	inesses, including part-tir	ne activities.	endar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$ 6,837.94	☐ Wages, commissions, bonuses, tips☐ Operating a business	s
For last calendar year: (January 1 to December 31, 2017	 ✓ Wages, commissions, bonuses, tips → Operating a business 	s <u>35,803.00</u>	Wages, commissions, bonuses, tips Operating a business	\$
For the calendar year before that: (January 1 to December 31,2016	Wages, commissions, bonuses, tips Operating a business	s_ <u>50,∞0</u>	☐ Wages, commissions, bonuses, tips☐ Operating a business	s
nclude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing	come is taxable. Examples nents; pensions; rental inco g a joint case and you have	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only onc	suits; royalties; and
active income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each	come is taxable. Examples nents; pensions; rental inco g a joint case and you have	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only onc	suits; royalties; and
<u></u>	come is taxable. Examples nents; pensions; rental inco g a joint case and you have	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only onc	suits; royalties; and
nclude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inco g a joint case and you have each source separately. De	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only onc t you listed in line 4.	suits; royalties; and e under Debtor 1. Gross Income from each source
clude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing st each source and the gross income from a No	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receive not include income that Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only onc t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
clude income regardless of whether that inc nemployment, and other public benefit paym ambling and lottery winnings. If you are filing st each source and the gross income from e No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receive not include income that Gross Income from each source (before deductions and exclusions)	money collected from laws ed together, list it only onc it you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
iclude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross Income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross Income from each source} \text{(before deductions and exclusions)} \end{array}	money collected from laws ed together, list it only onc it you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
nclude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing list each source and the gross income from each source and the gross income from each source. The details were supplied to the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross Income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross Income from each source} \text{(before deductions and exclusions)} \end{array}	money collected from laws ed together, list it only onc it you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
nclude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$ 0.00 \$	money collected from lawsed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
clude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing st each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$	money collected from lawsed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
relude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the gross income	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$	money collected from lawsed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
nclude income regardless of whether that income playment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) \$	money collected from lawsed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions) - \$

ebtor 1	Francisco Uribe First Name Meddie Nam	mş.	Last Name			Case number (# known)	
Part 3:	List Certain Paym	ents You	Made Befor	re You Filed	for Bankrupto	у	
. Are eit	her Debtor 1's or Deb	tor 2's deb	ts primarily c	onsumer debi	5 7		
		or Debtor 2	has primarily	consumer de	bts. Consumer d	ebts are defined in 11 U.S.	.C. § 101(8) as
			30 35:			total of \$6,225° or more?	
	No. Go to line 7.						
	total amoun	t you paid t	hat creditor. De	o not include p	ayments for dome	in one or more payments a estic support obligations, s ey for this bankruptcy case	such as
						on or after the date of adju	
ZÍ Yes	s. Debtor 1 or Debtor	2 or both h	ave orimarily	consumer de	bts.		
						lotal of \$600 or more?	
	☑ No. Go to line 7.						
	creditor. Do	not include	payments for	domestic supp	\$600 or more and nort obligations, sey for this bankru	d the total amount you paid uch as child support and plcy case.	i that
				Dates of payment	Total amount p	aid Amount you stil	ll owe Was this payment for
	Creditor's Name				S	s	
	Cledito 3 Name						☐ Car
	Number Street						☐ Credit card
							Loan repayment
							Suppliers or vendo
	City	State	ZIP Code				Other
	6 - Fr. (c. b)				S	\$	Mortgage
	Creditor's Name						☐ Car
	Number Street						☐ Credit card
							Loan repayment
							☐ Suppliers or vendo
	City	State	ZIP Code				Other
	City	State	ZIFCOM				
					s	\$	
	Creditor's Name						☐ Car
	A1 6 2						☐ Credit card
	Number Street						Loan repayment
							Suppliers or vendo
	City	State	ZIP Code				Other

rporations of which you pent, including one for a ch as child support and	atives; any geno u are an officer, a business you	eral partners; r , director, pers	elatives of any on in control, o	general partners; prowner of 20% or	partnerships of whic more of their voting	who was an insider? In you are a general partner; securities; and any managing domestic support obligations,
No						
Yes, List all payment	s to an insider,		Dates of payment	Total amount	Amount you still owe	Reason for this payment
			paymon	para		
Insider's Name		<u></u>	·	\$	\$	
Number Street						
		Jack Control	5			
City	State	ZIP Code				
insider's Name				s	\$	
liziosi z Martie						
Number Street						
	12470					
	State u filed for bank	ZIP Code kruptcy, did y	ou make any p	payments or trans	sfer any property o	n account of a debt that benefite
·	u filed for bani	kruptcy, did y or cosigned by		payments or trans Total amount paid	sfer any property o Amount you still owe	n account of a debt that benefits Reason for this payment Include creditor's name
thin 1 year before you insider? clude payments on deb	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
thin 1 year before you insider? cude payments on deb	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount	Amaunt you still	Reason for this payment
thin 1 year before you insider? clude payments on deb No Yes, List all payments	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
thin 1 year before you insider? dude payments on deb No Yes, List all payments	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
thin 1 year before you insider? ciude payments on deb No Yes. List all payments	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
thin 1 year before you insider? Clude payments on deb No Yes, List all payments Insider's Name	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
thin 1 year before you insider? ciude payments on deb No Yes. List all payments	u filed for bani	kruptcy, did y or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
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thin 1 year before you insider? clude payments on deb No Yes. List all payments Insider's Name	u filed for bank	kruptcy, did y or cosigned by d an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

Francisco Uribe	ist Name		Case number	(if known)		
rt 4: Identify Legal Actions, Repo		s, and Foreclosures				
Within 1 year before you filed for bankru List all such matters, including personal inju and contract disputes.						-
□ No ☑ Yes. Fill in the details.						
	Nature	of the case	Court or agency			Status of the cas
_{Case title} Wells Fargo Bank vs.	Foreci	osure	Circuit Court	of Cook	County	Pending
Francisco Uribe, et. al.			50 W. Washi	naton St.	#80	On appeal
47.00.45740	_		Number Street			Concluded
Case number 17-CH-15710	_		Chicago City	State	60602 ZIP Code	
Case title ACME Continental vs.	Collec	tion	Circuit Court	of Cook	County	Pending
Francisco Uribe	_		50 W. Washi	ngton St	. #80	On appeal Concluded
Case number 2017-M6-013339	_		Chicago	IL State	60602	
Yes. Fill in the information below.		Constitution of the consti			Pate	Makes of the second
		Describe the property			Date	Value of the proper
Wells Fargo Home Morgag Creditor's Name	е	by debtor	me, no longer inh	abited	Pending	s137,790.00
PO Box 10335	- 2	Explain what happens	d			
	50306 Code	Property was re Property was fo Property was ga	possessed. reclosed.	ed.		
		Describe the property			Date	Value of the prop
						\$
Creditor's Name	4	•				
Number Street		Explain what happene	d	7		
		Property was re				
City State ZIF	² Code	Property was ga				
ound an		Property was at	tached, seized, or levi	ed		

First Name Middle Name Lest	Name Cas	se number (# known)		
Least Leather Witness Leating Cast	7 700 11 10			
his 00 days before you filed for broken		T1-1 41441-		
ounts or refuse to make a payment bec	ptcy, did any creditor, including a bank or f	nnanciai institutio	n, set oπ any an	nounts from y
No	adde you owed a debit			
No Yes. Fill in the details				
res, Fill in the details.				
	Describe the action the creditor took		Date action	Amount
			was taken	
Creditor's Name				
				S
Number Street				
City State ZIP Code	Last 4 digits of account number: XXXX			
	Last 4 digits of booodin fluinger, 70001-			
hin 1 year before you filed for hankquat	cy, was any of your property in the posses	sion of an assign	aa fartha baaafi	t of
ditors, a court-appointed receiver, a cu		sion of an assign	ee ior me beneii	it of
No				
Yes				
163				
List Certain Gifts and Contribu	tions			
No	tcy, did you give any gifts with a total value	e of more than \$6	00 per person?	
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	tcy, did you give any gifts with a total value Describe the gifts	e of more than \$6	Dates you gave	Value
No Yes. Fill in the details for each gift		e of more than \$6		Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		e of more than \$6	Dates you gave	Value
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		e of more than \$6	Dates you gave	Value S
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		e of more than \$6	Dates you gave	Value \$
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		e of more than \$6	Dates you gave	Value S
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person		e of more than \$6	Dates you gave	Value S
No Yes. Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		e of more than \$6	Dates you gave	Value SS
No Yes. Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift		e of more than \$6	Dates you gave	Value SS
No Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street		e of more than \$6	Dates you gave	Value \$ \$
No Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIPCode		e of more than \$6	Dates you gave	Value S
Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIPCode		e of more than \$6	Dates you gave	Value S
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No Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600		e of more than \$6	Dates you gave the gifts Dates you gave	Value S S Value
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No Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	e of more than \$6	Dates you gave the gifts Dates you gave	SS
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No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift.	Describe the gifts	e of more than \$6	Dates you gave the gifts Dates you gave	SS
No Yes Fill in the details for each gift Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	e of more than \$6	Dates you gave the gifts Dates you gave	SS
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r 1	Francisco Uribe	Name Case number (# known)		
	CHRISTIAN MINIME SHILLING PROPERTY.	I Wall trig		
Vithi	n 2 years before you filed for bankrup	otcy, did you give any gifts or contributions with a total valu	ue of more than \$6	00 to any charity?
ZÍ N	-			
→ Y	es. Fill in the details for each gift or cont	tribution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
		2000		
_	harity's Name			S
-	nanty's name			
-				\$
N	umber Street			
Ci	ty State ZIP Code			
6:				
. b:	List Certain Losses			
	es. Fill in the details.	Describe any insurance coverage for the loss	Data of your	Value of many de
⊒ Y. I	o	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B. Property	Date of your loss	Value of property lost
) 1	es. Fill in the details. Describe the property you lost and			
) 1	es. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pending insurance		
] Y	es. Fill in the details. Describe the property you lost and	Include the amount that insurance has paid. List pending insurance		lost
Y	es. Fill in the details. Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B. Property.		lost
Y Y	ces. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trans	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost
Your	ces. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trans	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or trans	loss	lost
Your	ces. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trans n 1 year before you filed for bankrupt consulted about seeking bankruptcy of	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or trans	nsfer any property	lost
Your Your York Transfer of the Control of the Contr	ces. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transin 1 year before you filed for bankrupt consulted about seeking bankruptcy of any attorneys, bankruptcy pelition presents.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	nsfer any property	lost
Your councludes N	ces. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Transin 1 year before you filed for bankrupt consulted about seeking bankruptcy of any attorneys, bankruptcy pelition presents.	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	nsfer any property	lost
Your Concluction of the Young Conclusion of	List Certain Payments or Transon 1 year before you filed for bankrupt of any attorneys, bankruptcy pelition presents. Fill in the details. LeBlanc Nettles Davis	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	nsfer any property our bankruptcy. Date payment or transfer was	\$to anyone
Vithi ou concluct	List Certain Payments or Transon 1 year before you filed for bankrupt consulted about seeking bankruptcy of any attorneys, bankruptcy petition presess. Fill in the details. —eBlanc Nettles Davis	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B. Property. sfers tcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition? eparers, or credit counseling agencies for services required in your	nsfer any property our bankruptcy. Date payment or	\$to anyone
Your Concluction of the Property of the Proper	List Certain Payments or Transon 1 year before you filed for bankrupt of any attorneys, bankruptcy pelition presents. Fill in the details. LeBlanc Nettles Davis	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpressing a bankruptcy petition? Expanses, or credit counseling agencies for services required in your behalf pay or transpress.	nsfer any property our bankruptcy. Date payment or transfer was	to anyone Amount of paymen
Yes	List Certain Payments or Trans n 1 year before you filed for bankruptcy of any attorneys, bankruptcy petition presonsulted about seeking bankruptcy petition presons. Fill in the details. LeBlanc Nettles Davis Person Who Was Paid 401 E. Main Street Brownsburg IN 46112	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpressing a bankruptcy petition? Expanses, or credit counseling agencies for services required in your behalf pay or transpress.	nsfer any property our bankruptcy. Date payment or transfer was made	to anyone Amount of payment
You conclude the product of the prod	List Certain Payments or Trans n 1 year before you filed for bankrupt consulted about seeking bankruptcy of de any attorneys, bankruptcy petition pre of es. Fill in the details. Person Who Was Paid 401 E. Main Street Number Street Brownsburg IN 46112 Brownsburg IN 46112	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpressing a bankruptcy petition? Expanses, or credit counseling agencies for services required in your behalf pay or transpress.	nsfer any property our bankruptcy. Date payment or transfer was made	to anyone Amount of payments 1,000.06
Your Conclude State of the Conclude State of	List Certain Payments or Trans n 1 year before you filed for bankruptcy of any attorneys, bankruptcy petition presonsulted about seeking bankruptcy petition presons. Fill in the details. LeBlanc Nettles Davis Person Who Was Paid 401 E. Main Street Brownsburg IN 46112	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Sfers tcy, did you or anyone else acting on your behalf pay or transpressing a bankruptcy petition? Expanses, or credit counseling agencies for services required in your behalf pay or transpress.	nsfer any property our bankruptcy. Date payment or transfer was made	to anyone Amount of payments 1,000.06

		larre			
		Description and value of any property transferred	d	Date payment or transfer was made	Amount of payment
Hananwill		\$25			
Person Who Was Paid		\$25		03/22/2018	s 25.0
115 N. Cross St.					•
Charles Charles					s
Robinson IL	62454				
City State	ZIP Code				
www.hananwill.com					
Email or website address					
Person Who Made the Payment, if No	ot You				
not include any payment or tra No Yes. Fill in the details.	ansier mai yo				
		Description and value of any property transferred	d	Date payment or transfer was made	Amount of payme
Person Who Was Paid					
Number Street					\$
100000					
					\$
City State	ZIP Code for bankrup	tcy, did you sell, trade, or otherwise transfer	any property to	anyone, other th	an property
hin 2 years before you filed in the ordinary could be both outright transfers and	for bankrup rse of your b d transfers m	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed in insferred in the ordinary cour ude both outright transfers and not include gifts and transfers No	for bankrup rse of your b d transfers m	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	p er ty).
hin 2 years before you filed insferred in the ordinary count ude both outright transfers and transfers No Yes. Fill in the details.	for bankrup rse of your b d transfers m	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary cour ude both outright transfers and transfers No Yes. Fill in the details. Person Who Received Transfer	for bankrup rse of your k d transfers m that you hav	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary could ude both outright transfers and include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer	for bankrup rse of your b d transfers m	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary cour ude both outright transfers and transfers No Yes. Fill in the details. Person Who Received Transfer	for bankrup rse of your k d transfers m that you hav	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary cour ude both outright transfers and include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street City State	for bankrup rse of your k d transfers m that you hav	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary counting the property of the property o	for bankrup rse of your k d transfers m that you hav	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).
hin 2 years before you filed insferred in the ordinary could ude both outright transfers and include gifts and transfers. No Yes. Fill in the details. Person Who Received Transfer Number Street City State Person's relationship to you	for bankrup rse of your k d transfers m that you hav	susiness or financial affairs? ade as security (such as the granting of a secur e alreadylisted on this statement. Description and value of property	rity interestor mo	orlgage on yourpro	pperty).

re a beneficiary? (These a No		ptcy, did you transfer any proper sset-protection devices.)	ty to a self-settled trus	et or similar device of w	
re a beneficiary? (These a No			ty to a self-settled trus	et or similar device of w	
re a beneficiary? (These a No			τy to a self-settled trus	a or similar device of w	4.4-4
2 No Yes Fill in the details				or or annual bevioe of the	hich you
Yes Fill in the details					
		Description and value of the prope	rty transferred		Date transfer
					was made
Name of trust					
		-			
8: List Cortain Pinan	icial Account	s, Instruments, Safe Deposit	Boxes, and Storag	e Units	
No Yes. Fill in the details.	a.ua, cooper	atives, associations, and other fir	ionida maduudis.		
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
First Midwest Bank					
12015 S. Western		xxxx- <u>3</u> <u>5</u> <u>7</u> <u>6</u>	☑ Checking	01/15/2018	<u>\$ 32.</u>
Number Street	140.		Savings		
			Money market		
Blue Island IL			☐ Brokerage		
	60406 ate ZIP Code		☐ Brokerage		
		xxxx-	Other		\$
	ate ZIP Code	xxxx	Other		\$
City St.	ate ZIP Code	xxxx	Other		\$
City St. Name of Financial Institution	ate ZIP Code	xxxx	Other		\$
City St.	ate ZIP Code	xxxx	Checking Savings Money market		\$

ave you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No	r 1 Francisco Uribe	Last Name	Case number (# known)	
Ves. Fill in the details. Describe the contents Do you have to the contents Do you have to the contents Do you have to the contents Number Street	T #34 Feeling Kn2gas Feeling	LIBST MITTE		
Ves. Fill in the details. Describe the contents Do you have to live the storage Facility Name Nam	are you stored properly in a storess of	mit or along athor than your home with		
Ves. Fill in the details. Who else has or had access to it? Describe the contents Do you had not storage Facility Name Street Name Name or Storage Facility Name or Storage Facility Name or Storage Facility Name Name or Storage Facility Name Name or Storage Facility Name or Storage Facili		mit or brace other mail your nome within	n i year before you filed for bankruptcy	1
Who else has or had access to it? Describe the contents Do you have it?				
Number Street Number Street Number Street	i es, rin in the details.	Who also has as had seems to 147	Paradha tha annsa	
Number Street Number Street Number Street		who else has or had access to it?	Describe the contents	
Name Vet Number Street Number Street Number Street				
No				
City State 2IP Code Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value Number Street Number Street Number Street Number Street Number Street Number Street 2IP Code City State 2IP Code State	Name of Storage Facility	Name		☐ Ye
City State ZIP Code Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value Number Street Number Street Number Street Number Street Number Street State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code State ZIP Code City State ZIP Code State ZiP Code City State ZIP Code City State ZIP Code City State ZIP Code State ZiP Code City State ZiP Code State ZiP Code City State ZiP Code City State ZiP Code City State ZiP Code City State ZiP Code State ZiP Code State ZiP Code City State ZiP Code State ZiP Code State ZiP Code City State ZiP Code State ZiP Code State ZiP Code State ZiP Code City State ZiP Code State ZiP Code State ZiP Code State ZiP Code City State ZiP Code City State ZiP Code State ZiP Code City State ZiP Code State ZiP Code City State ZiP Code Stat	N			
Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Describe the property Value Where Is the property? Describe the property Value Thumber Street Number Street Number Street Describe the property Value Street City State ZIP Code City State ZIP Code City State ZIP Code City State ZIP Code Survivonmental law means any federal, state, or local statute or regulation concerning politution, contamination, releases of part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning politution, contamination, releases of part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning politution, contamination, releases of part 10, the following definitions apply: Environmental law nears any federal, state, or local statute or regulation concerning politution, contamination, releases of part 10, the following definitions apply: Environmental law, whether you now own, operate, or other medium, noticuling statutes or regulations controlling the cleanup of these substances, wastes, or material. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, politutant, contaminant, or similar term. ort all notices, releases, and proceedings that you know about, regardless of when they occurred. It is an any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Governmental unit Environmental law, if you know it Date of notices, release	Mulliper Street	muniper Street		
Identify Property You Hold or Control for Someone Elac		CityState ZIP Code		
Doyou hold or control any property You Hold or Control for Someone Elias				
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details.	City State ZIP Cod	e		
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes, Fill In the details. Where is the property? Describe the property Value Owner's Name Number Street Name of alte Number Street Number Street Number Street				
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Thold in trust for someone. Nowner's Name Number Street Name of site	Do you hold or control any property th	at someone else owns? Include any pro	perty you borrowed from are storing for	or .
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	ast Name	
	Describe the nature of the business	Employer Identification number
Businesa Name		Do not include Social Security number or ITIN.
Duantesa Name		EIN:
Number Street		
	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code	_	From To
City State 2F Code		
thin 2 years before you filed for bank	ruptov. did you give a financial statement to a	inyone about your business? Include all financial
titutions, creditors, or other parties.		, , , , , , , , , , , , , , , , , , , ,
No		
Yes. Fill in the details below.		
	Date Issued	
Name	MM / DD / YYYY	
Paulie	MM / DO / YYYY	
Number Street	_	
Number Sueer		
City State ZIP Code	-	
12: Sign Below		
		, and I declare under penalty of perjury that the
nswers are true and correct. I unders		ng property, or obtaining money or property by frau
nswers are true and correct. I unders	tand that making a false statement, concealir can result in fines up to \$250,000, or imprisor	ng property, or obtaining money or property by frau
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Signature of Debtor 1 Date 3 - 30 - /8 id you attach additional pages to You id you pay or agree to pay someone will be connected by the connection with a bankruptcy case of B U.S.C. §§ 152, 1341, 1519, and 3571.	tand that making a false statement, concealir can result in fines up to \$250,000, or imprisor Signature of Debtor 2	ng property, or obtaining money or property by frau nment for up to 20 years, or both.
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Fill in this inf	formation to ide	ntify your case:		
Debtor 1	Francisco Uri	ibe		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E Case number (If known)	Bankruptcy Court fo	r the: Southern District of I	ndiana	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Part 1: List Your Creditors Who Have Secured Claims

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C7
Creditor's name: Wells Fargo	Suπender the property.	☑ No
	Retain the property and redeem it.	☐ Yes
Description of 2061 West Canal St. property securing debt: Blue Island, IL 60406	Retain the property and enter into a Reaffirmation Agreement	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it,	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement	
	Retain the property and [explain]:	
Creditor's	Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement	
-	Retain the property and [exptain]:	

Check if this is an amended filing

12/15

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name;	□ No
Description of leased property:	☐ Yes
essor's name:	□ No
Description of leased property:	☐ Yes
.essor's name:	□ No
Description of leased	☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

				Distr.	ict Of Indiana		
In 1	re	Francisco Urit	oe -				
					Case N	lo	
Debtor				Chapte	r <u>7</u>		
		DISCI	LOSURE OF	COMPENSATION	ON OF ATTORNEY	FOR DEBTOR	
1.	nan ban	ned debtor(s) and lakruptcy, or agreed	that compens: I to be paid to	ation paid to me wi	thin one year before	am the attorney for the above the filing of the petition in ered on behalf of the debtor(s)	
	For	legal services, I h	ave agreed to	accept		<u>§</u> 1000	
	Bal	ance Due				\$	
2.	The	e source of the con	npensation pa	nid to me was:			
		Debtor		Other (specify)			
3.	The	source of compe	nsation to be p	paid to me is:			
		Debtor		Other (specify)			
4.		I have not ag members and ass			d compensation with	any other person unless they	are
		members or asso	ciates of my l	above-disclosed co law firm. A copy of ation, is attached.	ompensation with a of the agreement, toget	ther person or persons who are ther with a list of the names of	e not f the
5.		eturn for the above, including:	e-disclosed fe	ee, I have agreed to	render legal service	for all aspects of the bankrupt	су
	a.	Analysis of the d		cial situation, and r	endering advice to th	ne debtor in determining whetl	ner te
	b.	Preparation and f	iling of any p	petition, schedules,	statements of affairs	and plan which may be requir	red;
	c.	Representation o		t the meeting of cre	ditors and confirmati	ion hearing, and any adjourne	d

B2030 (Form 2030) (12/15)

- 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
 - a. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - b. Make-up meeting dates or court dates due to a previous missed meeting or court date;
 - c. Amendments to schedules;
 - d. Conversion to another chapter of bankruptcy.

CER'	FIFT!	3 A T	TON
1 66	1 112 41	A 1	

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

33018

Date

Umanda M. A

Signature of Attorney

LeBlanc Nettles Davis

Name of law firm

Verification of List (rev 08/11/15)

UNITED STATES BANKRUPTCY COURT Southern District of Indiana

In re: Francisco Uribe) Cons No
[Name of Debtor(s)]) Case No
Debtor(s).)
VERIFICATION (OF CREDITOR LIST
(I/We) declare that the submitted list of cre-	ditors is true and correct.
Dated: 3/30/2018	Signature of Debtor
	Signature of Joint Debtor

(Note: Certificate of Service not required.)